

FEC
FORM 3XREPORT OF RECEIPTS
AND DISBURSEMENTS
For Other Than An Authorized Committee

Office Use Only

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

ADDRESS (number and street)
▼

1310 G STREET, NW

Check if different
than previously
reported. (ACC)

WASHINGTON

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C00194746

3. IS THIS
REPORT

X

NEW
(N)

OR

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

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

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

(a) Quarterly Reports:

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

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

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (M13)

July 15
Quarterly Report(Q2)

(c) 12-Day

Primary (12P)

General (12G)

Runoff (12R)

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

Convention (12C)

Special (12S)

X January 31
Quarterly Report(YE)

Election on

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

(d) 30-Day

Post -Election
Report for the:

General (30G)

Runoff (30R)

Special (30S)

Termination Report
(TER)

Election on

in the
State of

5. Covering Period

1 0

1 1

2 0 0 1

through

1 2

3 1

2 0 0 1

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

Type or Print Name of Treasurer

KATHY DIDAWICK

Signature of Treasurer

Electronically Filed by KATHY DIDAWICK

Date

0 1

1 5

2 0 0 2

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

Office
Use
OnlyFEC FORM 3X
(Revised 1/2001)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/2001)

Page 2

Write or Type Committee Name

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Report Covering the Period: From: ^h10^h ^D11^h ^v2001^v To: ^h12^h ^D31^h ^v2001^v

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 ^v 2001 ^v		17579.01
(b) Cash on Hand at Beginning of Reporting Period	99212.76	
(c) Total Receipts (from Line 19)	64876.18	277898.90
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	164088.94	295477.91
7. Total Disbursements (from Line 30)	74918.90	206307.87
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	89170.04	89170.04
9. Debts and Obligations owed TO the committee (itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

Toll Free 800-426-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Revised 1/2001)

Page 3

Write or Type Committee Name

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Report Covering the Period: From: ^h10 ^d11 ^y2001 To: ^h12 ^d31 ^y2001

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	13154.86	
(i) Itemized (use Schedule A)	13316.32	
(ii) Unitemized		
(III) TOTAL (add Lines 11(a)(i) and (ii) ►	26471.18	135499.89
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	7040.59
(d) Total Contributions (add Lines 11(a)(III), (b) and (c)) (Carry Totals to Line 32, page 4) ►	26471.18	142540.48
12. Transfers From Affiliated/Other Party Committees	38105.00	130120.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	238.42
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18) ►	64876.18	277898.90
20. Total Federal Receipts (subtract Line 18 from Line 19) ►	64876.18	277898.90

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Revised 1/2001)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	251.62
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ►	0.00	251.62
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	74918.90	206056.25
24. Independent Expenditure (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	74918.90	206307.87
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)	74918.90	206307.87
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) from Line 11(d), page 3)	26471.18	142540.48
33. Total Contribution Refunds (from Line 28(d))	0.00	0.00
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)	26471.18	142540.48
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... ►	0.00	251.62
36. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
37. Net Operating Expenditures (subtract Line 36 from Line 35)	0.00	251.62

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

State

Zip Code

APPLE VALLEY

MN

55124

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000314S000001L11A1

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

State

Zip Code

APPLE VALLEY

MN

55124

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000336S000001L11A1

Full Name (Last, First, Middle Initial)

C. CHRISTOPHER AASLAND

Mailing Address

13790 GUILD AVE.

City

State

Zip Code

APPLE VALLEY

MN

55124

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000337S000001L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHRISTOPHER AASLAND

Mailing Address

13780 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B0003416000001L11A1

Full Name (Last, First, Middle Initial)

B. CHRISTOPHER AASLAND

Mailing Address

13780 GUILD AVE.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

12 / 27 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B0003596000001L11A1

Full Name (Last, First, Middle Initial)

C. JAMES S. ADAMSON, JR.

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

11 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0002986000001L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMES S. ADAMSON JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

N M / D E / Y Y Y Y
11 / 05 / 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B000299S000001L11A1

Full Name (Last, First, Middle Initial)

B. JAMES S. ADAMSON JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B000326S000001L11A1

Full Name (Last, First, Middle Initial)

C. SHARON K. ALLEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

N M / D E / Y Y Y Y
11 / 05 / 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B000298S000002L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SHARON K. ALLEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 / 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000299S000002L11A1

Full Name (Last, First, Middle Initial)

B. SHARON K. ALLEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000326S000002L11A1

Full Name (Last, First, Middle Initial)

C. JOHN ANDERSON

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 / 2 0 0 1

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Transaction ID: B000334S000008L11A1

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)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KAY L. ANDREWS

Mailing Address

514 PRESTWICK DRIVE

City

State

Zip Code

FLORENCE

SC

29501

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
11 13 2001

Amount of Each Receipt this Period

28.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT TRICARE

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Transaction ID: B0003026000005L11A1

Full Name (Last, First, Middle Initial)

B. KAY L. ANDREWS

Mailing Address

514 PRESTWICK DRIVE

City

State

Zip Code

FLORENCE

SC

29501

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
11 13 2001

Amount of Each Receipt this Period

28.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT TRICARE

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

662.00

Transaction ID: B0003036000005L11A1

Full Name (Last, First, Middle Initial)

C. PETER J. BABIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
11 05 2001

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MONTANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B0003006000001L11A1

SUBTOTAL of Receipts This Page (optional)

71.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PETER J. BABIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MONTANA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000311S000001L11A1

Full Name (Last, First, Middle Initial)

B. PETER J. BABIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 / 2 0 0 1

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MONTANA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000333S000001L11A1

Full Name (Last, First, Middle Initial)

C. PETER J. BABIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MONTANA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000348S000001L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PETER J. BABIN

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 27 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer
BC/BS OF MONTANA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000360S000001L11A1

Full Name (Last, First, Middle Initial)

B. LESLIE BAKER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Transaction ID: B000334S0000021L11A1

Full Name (Last, First, Middle Initial)

C. LESLIE BAKER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Transaction ID: B000336S0000021L11A1

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)
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FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 10 / 2001

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Transaction ID: B000314S000002L11A1

Full Name (Last, First, Middle Initial)

B. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Transaction ID: B000336S000002L11A1

Full Name (Last, First, Middle Initial)

C. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

40.00

Name of Employer
BC/BS OF MINNESOTA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Transaction ID: B000337S000002L11A1

SUBTOTAL of Receipts This Page (optional) ▶

120.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

N M / D E / Y Y Y Y
12 / 05 / 2001

Amount of Each Receipt this Period

40.00

Transaction ID: B000341S000002L11A1

Full Name (Last, First, Middle Initial)

B. MARK W. BANKS

Mailing Address

4634 EDGEBROOK PL.

City

State

Zip Code

EDIN

MN

55424

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1040.00

Date of Receipt

N M / D E / Y Y Y Y
12 / 27 / 2001

Amount of Each Receipt this Period

40.00

Transaction ID: B000359S000002L11A1

Full Name (Last, First, Middle Initial)

C. JAMES BARONE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B000324S000005L11A1

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMES BARDONE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Name of Employer
BC/BS OF ILLINOIS

Occupation
HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B000340S000005L11A1

Full Name (Last, First, Middle Initial)

B. JAMES BARDONE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Name of Employer
BC/BS OF ILLINOIS

Occupation
HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

12 / 17 / 2001

Amount of Each Receipt this Period

30.00

Transaction ID: B000350S000005L11A1

Full Name (Last, First, Middle Initial)

C. JUDITH A. BERTLING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer
BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation
VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

10 / 12 / 2001

Amount of Each Receipt this Period

12.00

Transaction ID: B000283S000004L11A1

SUBTOTAL of Receipts This Page (optional) ▶

62.00

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

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JUDITH A. BERTLING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B0002916000003L11A1

Full Name (Last, First, Middle Initial)

B. JUDITH A. BERTLING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B0003085000003L11A1

Full Name (Last, First, Middle Initial)

C. JUDITH A. BERTLING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B0003205000003L11A1

SUBTOTAL of Receipts This Page (optional)

36.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JUDITH A. BERTLING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B0003456000003L11A1

Full Name (Last, First, Middle Initial)

B. JUDITH A. BERTLING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 21 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B0003635000003L11A1

Full Name (Last, First, Middle Initial)

C. JULIA BIETSCH

Mailing Address

4026 SASSAFRAS

City

State

Zip Code

BELLEVILLE

IL

62221

Date of Receipt

10 / 19 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0002875000003L11A1

SUBTOTAL of Receipts This Page (optional) ▶

54.00

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

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JULIA BIETSCH

Mailing Address

4026 SASSAFRAS

City

BELLEVILLE

State

IL

Zip Code

62221

Date of Receipt

N M / D C / Y Y Y Y
11 / 06 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B000301S000003L11A1

Full Name (Last, First, Middle Initial)

B. JULIA BIETSCH

Mailing Address

4026 SASSAFRAS

City

BELLEVILLE

State

IL

Zip Code

62221

Date of Receipt

N M / D C / Y Y Y Y
11 / 20 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B000319S000003L11A1

Full Name (Last, First, Middle Initial)

C. JULIA BIETSCH

Mailing Address

4026 SASSAFRAS

City

BELLEVILLE

State

IL

Zip Code

62221

Date of Receipt

N M / D C / Y Y Y Y
12 / 04 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B000331S000003L11A1

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)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JULIA BIETSCH

Mailing Address

4D26 SASSAFRAS

City

BELLEVILLE

State

IL

Zip Code

62221

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0003536000003L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT BODEN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Transaction ID: B000334S000022L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT BODEN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Transaction ID: B000336S000022L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID BOUCHER

Mailing Address

417 WOTAN ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0003026000021L11A1

Full Name (Last, First, Middle Initial)

B. DAVID BOUCHER

Mailing Address

417 WOTAN ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0003036000021L11A1

Full Name (Last, First, Middle Initial)

C. JERRY W. BRADSHAW

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Transaction ID: B0002986000005L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JERRY W. BRADSHAW

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

11 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Transaction ID: B000299S000005L11A1

Full Name (Last, First, Middle Initial)

B. JERRY W. BRADSHAW

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Transaction ID: B000326S000005L11A1

Full Name (Last, First, Middle Initial)

C. ANGELA F. BRALY

Mailing Address

221 HAWTHORNE AVE.

City

State

Zip Code

WEBSTER GROVES

MO

63119

Date of Receipt

10 / 19 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Transaction ID: B000287S000005L11A1

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ANGELA F. BRALY

Mailing Address

221 HAWTHORNE AVE.

City

State

Zip Code

WEBSTER GROVES

MO

63119

FEC ID number of contributing
federal political committee.

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 06 / 2001

Amount of Each Receipt this Period

40.00

Transaction ID: B000301S000005L11A1

Full Name (Last, First, Middle Initial)

B. ANGELA F. BRALY

Mailing Address

221 HAWTHORNE AVE.

City

State

Zip Code

WEBSTER GROVES

MO

63119

FEC ID number of contributing
federal political committee.

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

11 / 20 / 2001

Amount of Each Receipt this Period

40.00

Transaction ID: B000319S000005L11A1

Full Name (Last, First, Middle Initial)

C. ANGELA F. BRALY

Mailing Address

221 HAWTHORNE AVE.

City

State

Zip Code

WEBSTER GROVES

MO

63119

FEC ID number of contributing
federal political committee.

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

12 / 04 / 2001

Amount of Each Receipt this Period

40.00

Transaction ID: B000331S000005L11A1

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ANGELA F. BRALY

Mailing Address

221 HAWTHORNE AVE.

City

State

Zip Code

WEBSTER GROVES

MO

63119

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 18 / 2001

Amount of Each Receipt this Period

40.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Transaction ID: B0003536000005L11A1

Full Name (Last, First, Middle Initial)

B. JAMES M. BRITTEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 23 / 2001

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0003245000008L11A1

Full Name (Last, First, Middle Initial)

C. JAMES M. BRITTEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0003405000008L11A1

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)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMES M. BRITTEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer
BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B000350S000008L11A1

Full Name (Last, First, Middle Initial)

B. ANN T. BURNETT

Mailing Address

2 TOMBEE COURT

City

State

Zip Code

COLUMBIA

SC

29209

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

9.81

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

218.46

Transaction ID: B000302S000031L11A1

Full Name (Last, First, Middle Initial)

C. ANN T. BURNETT

Mailing Address

2 TOMBEE COURT

City

State

Zip Code

COLUMBIA

SC

29209

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

9.81

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

218.46

Transaction ID: B000303S000031L11A1

SUBTOTAL of Receipts This Page (optional)

49.62

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT D. CABE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 2 0 0 1

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Transaction ID: B000298S000006L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT D. CABE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 2 0 0 1

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Transaction ID: B000298S000006L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT D. CABE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Transaction ID: B000326S000006L11A1

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STUART K. CAMPBELL

Mailing Address

16510 BAXTER FRST RG

City

CHESTERFIELD

State

MO

Zip Code

63005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0002876000007L11A1

Full Name (Last, First, Middle Initial)

B. STUART K. CAMPBELL

Mailing Address

16510 BAXTER FRST RG

City

CHESTERFIELD

State

MO

Zip Code

63005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003015000007L11A1

Full Name (Last, First, Middle Initial)

C. STUART K. CAMPBELL

Mailing Address

16510 BAXTER FRST RG

City

CHESTERFIELD

State

MO

Zip Code

63005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003195000007L11A1

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)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STUART K. CAMPBELL

Mailing Address

18510 BAXTER FRST RG

City

CHESTERFIELD

State

MO

Zip Code

63005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 4 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003316000007L11A1

Full Name (Last, First, Middle Initial)

B. STUART K. CAMPBELL

Mailing Address

18510 BAXTER FRST RG

City

CHESTERFIELD

State

MO

Zip Code

63005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003538000007L11A1

Full Name (Last, First, Middle Initial)

C. ROSELYN G. CATOE

Mailing Address

520 WOTAN RD.

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BCBS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Transaction ID: B0003028000042L11A1

SUBTOTAL of Receipts This Page (optional)

70.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RDSLYN C. GATOE

Mailing Address

520 WOTAN RD.

City

COLUMBIA

State

SC

Zip Code

29229

Date of Receipt

11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Transaction ID: B000303S000042L11A1

Full Name (Last, First, Middle Initial)

B. JOHN CERISANO

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

10 / 12 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000283S000008L11A1

Full Name (Last, First, Middle Initial)

C. JOHN CERISANO

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

10 / 26 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000291S000007L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN CERISANO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 09 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000308S000007L11A1

Full Name (Last, First, Middle Initial)

B. JOHN CERISANO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000320S000007L11A1

Full Name (Last, First, Middle Initial)

C. JOHN CERISANO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000345S000007L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN CERISANO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000363S000007L11A1

Full Name (Last, First, Middle Initial)

B. FRANK CHASE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

ADVANCED HEALTH SYSTEMS, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000284S000001L11A1

Full Name (Last, First, Middle Initial)

C. FRANK CHASE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 1 9 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

ADVANCED HEALTH SYSTEMS, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000316S000001L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. FRANK CHASE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

ADVANCED HEALTH SYSTEMS, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000361S000001L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM JAMES COLBOURNE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000283S000008L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM JAMES COLBOURNE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000291S000008L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM JAMES COLBOURNE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 09 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000308S000008L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM JAMES COLBOURNE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000320S000008L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM JAMES COLBOURNE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000345S000008L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM JAMES COLBOURNE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000363S000008L11A1

Full Name (Last, First, Middle Initial)

B. TAYLOR I. COOK

Mailing Address

2108 CITATION COURT

City

State

Zip Code

MOUNT PLEASANT

SC

29464

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

13.85

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

368.10

Transaction ID: B000302S0000052L11A1

Full Name (Last, First, Middle Initial)

C. TAYLOR I. COOK

Mailing Address

2108 CITATION COURT

City

State

Zip Code

MOUNT PLEASANT

SC

29464

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

13.85

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

368.10

Transaction ID: B000303S0000052L11A1

SUBTOTAL of Receipts This Page (optional)

42.70

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DEXTER K. COOLIDGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

28.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Transaction ID: B000283S000011L11A1

Full Name (Last, First, Middle Initial)

B. DEXTER K. COOLIDGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

28.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Transaction ID: B000281S000010L11A1

Full Name (Last, First, Middle Initial)

C. DEXTER K. COOLIDGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 9 / 2 0 0 1

Amount of Each Receipt this Period

28.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Transaction ID: B000308S000010L11A1

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DEXTER K. COOLIDGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Transaction ID: B000320S000010L11A1

Full Name (Last, First, Middle Initial)

B. DEXTER K. COOLIDGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Transaction ID: B000345S000010L11A1

Full Name (Last, First, Middle Initial)

C. DEXTER K. COOLIDGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

28.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

728.00

Transaction ID: B000363S000010L11A1

SUBTOTAL of Receipts This Page (optional)

84.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JUDITH M. DAVIS

Mailing Address

1309 WELLINGTON DRIVE

City

COLUMBIA

State

SC

Zip Code

29204

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

16.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP & CORP GENERAL COUNSEL

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

352.89

Transaction ID: B000302S000060L11A1

Full Name (Last, First, Middle Initial)

B. JUDITH M. DAVIS

Mailing Address

1309 WELLINGTON DRIVE

City

COLUMBIA

State

SC

Zip Code

29204

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

16.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP & CORP GENERAL COUNSEL

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

352.89

Transaction ID: B000303S000060L11A1

Full Name (Last, First, Middle Initial)

C. DAVID LEE DEAL

Mailing Address

1310 G STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.67

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

200.04

Transaction ID: B000328S000024L11A1

SUBTOTAL of Receipts This Page (optional)

50.51

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID LEE DEAL

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

16.87

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

200.04

Transaction ID: B0003356000024L11A1

Full Name (Last, First, Middle Initial)

B. KATHY DIDAWICK

Mailing Address

3015 S 7TH STREET

City

State

Zip Code

ARLINGTON

DC

22204

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

TREASURER, BLUE PAC

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B0002835000012L11A1

Full Name (Last, First, Middle Initial)

C. KATHY DIDAWICK

Mailing Address

3015 S 7TH STREET

City

State

Zip Code

ARLINGTON

DC

22204

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

TREASURER, BLUE PAC

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B0002915000011L11A1

SUBTOTAL of Receipts This Page (optional)

96.67

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHY DIDAWICK

Mailing Address

3D15 S 7TH STREET

City

ARLINGTON

State

DC

Zip Code

22204

Date of Receipt

N M / D E / Y Y Y Y
11 / 09 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

TREASURER, BLUE PAC

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B000308S000011L11A1

Full Name (Last, First, Middle Initial)

B. KATHY DIDAWICK

Mailing Address

3D15 S 7TH STREET

City

ARLINGTON

State

DC

Zip Code

22204

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

TREASURER, BLUE PAC

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B000320S000011L11A1

Full Name (Last, First, Middle Initial)

C. KATHY DIDAWICK

Mailing Address

3D15 S 7TH STREET

City

ARLINGTON

State

DC

Zip Code

22204

Date of Receipt

N M / D E / Y Y Y Y
12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

TREASURER, BLUE PAC

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B000345S000011L11A1

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHY DIDAWICK

Mailing Address

3D15 S 7TH STREET

City

ARLINGTON

State

DC

Zip Code

22204

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BLUE CROSS BLUE SHIELD ASSOCIATION

Occupation

TREASURER, BLUE PAC

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B000363S0000011L11A1

Full Name (Last, First, Middle Initial)

B. CAROL DOFFING-KRAFT

Mailing Address

1314 FURLONG AVE.

City

MENDOTA HGTS.

State

MN

Zip Code

55120

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000314S0000003L11A1

Full Name (Last, First, Middle Initial)

C. CAROL DOFFING-KRAFT

Mailing Address

1314 FURLONG AVE.

City

MENDOTA HGTS.

State

MN

Zip Code

55120

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000336S0000003L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CAROL DOFFING-KRAFT

Mailing Address

1314 FURLONG AVE.

City

State

Zip Code

MENDOTA HGTS.

MN

55120

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 05 / 2011

Amount of Each Receipt this Period

10.00

Transaction ID: B000337S000003L11A1

Full Name (Last, First, Middle Initial)

B. CAROL DOFFING-KRAFT

Mailing Address

1314 FURLONG AVE.

City

State

Zip Code

MENDOTA HGTS.

MN

55120

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 05 / 2011

Amount of Each Receipt this Period

10.00

Transaction ID: B000341S000003L11A1

Full Name (Last, First, Middle Initial)

C. CAROL DOFFING-KRAFT

Mailing Address

1314 FURLONG AVE.

City

State

Zip Code

MENDOTA HGTS.

MN

55120

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

12 / 27 / 2011

Amount of Each Receipt this Period

10.00

Transaction ID: B000359S000003L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PAUL A. DYKES

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B0002856000003L11A1

Full Name (Last, First, Middle Initial)

B. PAUL A. DYKES

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B0003065000003L11A1

Full Name (Last, First, Middle Initial)

C. PAUL A. DYKES

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B0003475000003L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN M. EARLEY

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 05 / 2001

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0003006000004L11A1

Full Name (Last, First, Middle Initial)

B. JOHN M. EARLEY

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 13 / 2001

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0003115000004L11A1

Full Name (Last, First, Middle Initial)

C. JOHN M. EARLEY

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0003335000004L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN M. EARLEY

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 17 / 2001

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B000348S000004L11A1

Full Name (Last, First, Middle Initial)

B. JOHN M. EARLEY

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2001

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS BLUE SHIELD

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B000360S000004L11A1

Full Name (Last, First, Middle Initial)

C. JOHN T. ERICKSEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

10 / 12 / 2001

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000283S000013L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN T. ERICKSEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B0002916000012L11A1

Full Name (Last, First, Middle Initial)

B. JOHN T. ERICKSEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B0003085000012L11A1

Full Name (Last, First, Middle Initial)

C. JOHN T. ERICKSEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B0003205000012L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN T. ERICKSEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 07 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B0003456000012L11A1

Full Name (Last, First, Middle Initial)

B. JOHN T. ERICKSEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 21 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B0003635000012L11A1

Full Name (Last, First, Middle Initial)

C. JORDAN D. EVANS

Mailing Address

2618 HARLESTON GREEN

City

State

Zip Code

FLORENCE

SC

29505

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ASST. VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B00030250000069L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JORDAN D. EVANS

Mailing Address

2618 HARLESTON GREEN

City

FLORENCE

State

SC

Zip Code

29505

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ASST. VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Transaction ID: B000303S000069L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM EVERLEY

Mailing Address

1310 G STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

16.67

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

200.04

Transaction ID: B000328S000026L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM EVERLEY

Mailing Address

1310 G STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 / 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

16.67

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

200.04

Transaction ID: B000335S000026L11A1

SUBTOTAL of Receipts This Page (optional)

48.34

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. THOMAS FAULDS

Mailing Address

312 WEST SPINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

PRESIDENT & COO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0003026000071L11A1

Full Name (Last, First, Middle Initial)

B. THOMAS FAULDS

Mailing Address

312 WEST SPINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

PRESIDENT & COO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0003036000071L11A1

Full Name (Last, First, Middle Initial)

C. REGINA H. FAVORS

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0002986000010L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. REGINA H. FAVORS

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000299S000010L11A1

Full Name (Last, First, Middle Initial)

B. REGINA H. FAVORS

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000326S000010L11A1

Full Name (Last, First, Middle Initial)

C. THOMAS FENTER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
10 / 15 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

60.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Transaction ID: B000284S000005L11A1

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. THOMAS FENTER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

80.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Transaction ID: B000316S000005L11A1

Full Name (Last, First, Middle Initial)

B. THOMAS FENTER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

80.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Transaction ID: B000361S000005L11A1

Full Name (Last, First, Middle Initial)

C. JOSEPH P. FLEMING

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MONTANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Transaction ID: B000300S000005L11A1

SUBTOTAL of Receipts This Page (optional)

140.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH P. FLEMING

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MONTANA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Transaction ID: B000311S000005L11A1

Full Name (Last, First, Middle Initial)

B. JOSEPH P. FLEMING

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MONTANA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Transaction ID: B000333S000005L11A1

Full Name (Last, First, Middle Initial)

C. JOSEPH P. FLEMING

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF MONTANA

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Transaction ID: B000348S000005L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOSEPH P. FLEMING

Mailing Address

1310 G STREET, NW

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

MM / DD / YYYY
12 / 27 / 2011

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MONTANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Transaction ID: B000360S000005L11A1

Full Name (Last, First, Middle Initial)

B. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55410

Date of Receipt

MM / DD / YYYY
11 / 18 / 2011

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000314S000004L11A1

Full Name (Last, First, Middle Initial)

C. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55410

Date of Receipt

MM / DD / YYYY
12 / 05 / 2011

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000336S000004L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55410

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000337S000004L11A1

Full Name (Last, First, Middle Initial)

B. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55410

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000341S000004L11A1

Full Name (Last, First, Middle Initial)

C. SUSAN G. FLYGARE

Mailing Address

5322 RUSSELL AVE. S.

City

State

Zip Code

MINNEAPOLIS

MN

55410

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000359S000004L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ALISSA T. FOX

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000283S000014L11A1

Full Name (Last, First, Middle Initial)

B. ALISSA T. FOX

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000291S000013L11A1

Full Name (Last, First, Middle Initial)

C. ALISSA T. FOX

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 9 / 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000308S000013L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ALISSA T. FOX

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000320S000013L11A1

Full Name (Last, First, Middle Initial)

B. ALISSA T. FOX

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000345S000013L11A1

Full Name (Last, First, Middle Initial)

C. ALISSA T. FOX

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXEC. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000363S000013L11A1

SUBTOTAL of Receipts This Page (optional) ▶

60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KAYLIN FRAPPIER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000321S000023L11A1

Full Name (Last, First, Middle Initial)

B. KAYLIN FRAPPIER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000327S000023L11A1

Full Name (Last, First, Middle Initial)

C. STEPHEN GAMMARINO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000283S000015L11A1

SUBTOTAL of Receipts This Page (optional)

48.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN GAMMARINO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B0002916000014L11A1

Full Name (Last, First, Middle Initial)

B. STEPHEN GAMMARINO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B0003085000014L11A1

Full Name (Last, First, Middle Initial)

C. STEPHEN GAMMARINO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B0003205000014L11A1

SUBTOTAL of Receipts This Page (optional)

24.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN GAMMARINO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 07 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B0003456000014L11A1

Full Name (Last, First, Middle Initial)

B. STEPHEN GAMMARINO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 21 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B0003635000014L11A1

Full Name (Last, First, Middle Initial)

C. JOYCE D. GANDY

Mailing Address

2106 ELDERBERRY DRIVE

City

State

Zip Code

FLORENCE

SC

29505

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR, MEDICAL AFFAIRS

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Transaction ID: B0003025000085L11A1

SUBTOTAL of Receipts This Page (optional)

36.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOYCE C. GANDY

Mailing Address

2108 ELDERBERRY DRIVE

City

State

Zip Code

FLORENCE

SC

29505

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
11 / 13 / 2001

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR, MEDICAL AFFAIRS

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

405.00

Transaction ID: B000303S000085L11A1

Full Name (Last, First, Middle Initial)

B. JOAN M. GARDNER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
10 / 12 / 2001

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EX. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000283S000016L11A1

Full Name (Last, First, Middle Initial)

C. JOAN M. GARDNER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

M M / D D / Y Y Y Y
10 / 26 / 2001

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EX. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000291S000015L11A1

SUBTOTAL of Receipts This Page (optional)

64.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOAN M. GARDNER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 09 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EX. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000308S000015L11A1

Full Name (Last, First, Middle Initial)

B. JOAN M. GARDNER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EX. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000320S000015L11A1

Full Name (Last, First, Middle Initial)

C. JOAN M. GARDNER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EX. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000345S000015L11A1

SUBTOTAL of Receipts This Page (optional)

66.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOAN M. GARDNER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EX. DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000363S000015L11A1

Full Name (Last, First, Middle Initial)

B. LAUNNIE GINN

Mailing Address

P.O. BOX 1043

City

State

Zip Code

JACKSON

MS

39215-1043

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000284S000006L11A1

Full Name (Last, First, Middle Initial)

C. LAUNNIE GINN

Mailing Address

P.O. BOX 1043

City

State

Zip Code

JACKSON

MS

39215-1043

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 1 9 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000316S000006L11A1

SUBTOTAL of Receipts This Page (optional)

102.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LAUNNIE GINN

Mailing Address

P.O. BOX 1043

City

JACKSON

State

MS

Zip Code

39215-1043

Date of Receipt

12 / 27 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Transaction ID: B000361S000006L11A1

Full Name (Last, First, Middle Initial)

B. VICKY B. GREGG

Mailing Address

1310 G STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

75.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Transaction ID: B000328S000037L11A1

Full Name (Last, First, Middle Initial)

C. VICKY B. GREGG

Mailing Address

1310 G STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

75.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Transaction ID: B000335S000037L11A1

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)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. T.K. GRIFFIS, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

400.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Transaction ID: B000284S000007L11A1

Full Name (Last, First, Middle Initial)

B. CHRISTINA GROSZER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000283S0000019L11A1

Full Name (Last, First, Middle Initial)

C. CHRISTINA GROSZER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 9 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000308S0000018L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

A. Full Name (Last, First, Middle Initial) CHRISTINA GROSZER Mailing Address 1310 G STREET, N.W. City State Zip Code WASHINGTON DC 20005 FEC ID number of contributing federal political committee. Name of Employer Occupation BLUE CROSS/BLUE SHIELD ASSOCIATION DIRECTOR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00	Date of Receipt N M / D E / Y Y Y Y 1 1 / 2 3 / 2 0 0 1 Amount of Each Receipt this Period 10.00 Transaction ID: B000320S000018L11A1
B. Full Name (Last, First, Middle Initial) CHRISTINA GROSZER Mailing Address 1310 G STREET, N.W. City State Zip Code WASHINGTON DC 20005 FEC ID number of contributing federal political committee. Name of Employer Occupation BLUE CROSS/BLUE SHIELD ASSOCIATION DIRECTOR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00	Date of Receipt N M / D E / Y Y Y Y 1 2 / 0 7 / 2 0 0 1 Amount of Each Receipt this Period 10.00 Transaction ID: B000345S000018L11A1
C. Full Name (Last, First, Middle Initial) CHRISTINA GROSZER Mailing Address 1310 G STREET, N.W. City State Zip Code WASHINGTON DC 20005 FEC ID number of contributing federal political committee. Name of Employer Occupation BLUE CROSS/BLUE SHIELD ASSOCIATION DIRECTOR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 250.00	Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 1 / 2 0 0 1 Amount of Each Receipt this Period 10.00 Transaction ID: B000363S000018L11A1

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

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHERINE J. HAMEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0002836000020L11A1

Full Name (Last, First, Middle Initial)

B. KATHERINE J. HAMEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0002915000019L11A1

Full Name (Last, First, Middle Initial)

C. KATHERINE J. HAMEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 9 / 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003085000019L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHERINE J. HAMEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000320S000019L11A1

Full Name (Last, First, Middle Initial)

B. KATHERINE J. HAMEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000345S000019L11A1

Full Name (Last, First, Middle Initial)

C. KATHERINE J. HAMEN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000363S000019L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL HAMERLIK

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

Amount of Each Receipt this Period

25.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Transaction ID: B000321S000003L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL HAMERLIK

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

Amount of Each Receipt this Period

25.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Transaction ID: B000327S000003L11A1

Full Name (Last, First, Middle Initial)

C. THOMAS HARTNETT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
12 / 05 / 2001

Amount of Each Receipt this Period

34.75

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

799.25

Transaction ID: B000334S000010L11A1

SUBTOTAL of Receipts This Page (optional)

84.75

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. THOMAS HARTNETT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

34.75

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

799.25

Transaction ID: B000338S000010L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL A. HAYES

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

10 / 15 / 2001

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Transaction ID: B000285S000006L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL A. HAYES

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 13 / 2001

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Transaction ID: B000306S000006L11A1

SUBTOTAL of Receipts This Page (optional) ▶

94.75

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

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL A. HAYES

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Transaction ID: B000347S000006L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM ANDREW HENSLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000283S0000025L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM ANDREW HENSLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000291S0000024L11A1

SUBTOTAL of Receipts This Page (optional)

74.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM ANDREW HENSLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 09 / 2001

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000308S000024L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM ANDREW HENSLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000320S000024L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM ANDREW HENSLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
12 / 07 / 2001

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000345S000024L11A1

SUBTOTAL of Receipts This Page (optional)

66.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM ANDREW HENSLEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

22.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

572.00

Transaction ID: B000363S000024L11A1

Full Name (Last, First, Middle Initial)

B. CHARLES L. HIGGINS

Mailing Address

505 MEADOW BROOK ROAD

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ETHICS OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

424.00

Transaction ID: B000302S000102L11A1

Full Name (Last, First, Middle Initial)

C. CHARLES L. HIGGINS

Mailing Address

505 MEADOW BROOK ROAD

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ETHICS OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

424.00

Transaction ID: B000303S000102L11A1

SUBTOTAL of Receipts This Page (optional)

62.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBIN S. HOLLAND

Mailing Address

218 FOX CATCHER DR.

City

State

Zip Code

MYRTLE BEACH

SC

29588

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000302S000108L11A1

Full Name (Last, First, Middle Initial)

B. ROBIN S. HOLLAND

Mailing Address

218 FOX CATCHER DR.

City

State

Zip Code

MYRTLE BEACH

SC

29588

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000303S000108L11A1

Full Name (Last, First, Middle Initial)

C. CHERYL HOWE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000334S000011L11A1

SUBTOTAL of Receipts This Page (optional) ►

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHERYL HOWE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B0003386000011L11A1

Full Name (Last, First, Middle Initial)

B. BRUCE W. HUGHES

Mailing Address

124 COVE COURT

City

State

Zip Code

IRMO

SC

29063

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 13 / 2001

Amount of Each Receipt this Period

16.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

EXEC VP COO, PGBA

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Transaction ID: B0003025000109L11A1

Full Name (Last, First, Middle Initial)

C. BRUCE W. HUGHES

Mailing Address

124 COVE COURT

City

State

Zip Code

IRMO

SC

29063

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 13 / 2001

Amount of Each Receipt this Period

16.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

EXEC VP COO, PGBA

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

361.00

Transaction ID: B0003035000109L11A1

SUBTOTAL of Receipts This Page (optional)

42.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DON INGALLS

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000334S000005L11A1

Full Name (Last, First, Middle Initial)

B. DON INGALLS

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000338S000005L11A1

Full Name (Last, First, Middle Initial)

C. WEIDEMAN JANINE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000321S000030L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WEIDEMAN JANINE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000327S000030L11A1

Full Name (Last, First, Middle Initial)

B. GEORGE L. JOHNSON

Mailing Address

217 WHITE BIRCH CIRCLE

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Transaction ID: B000302S000115L11A1

Full Name (Last, First, Middle Initial)

C. GEORGE L. JOHNSON

Mailing Address

217 WHITE BIRCH CIRCLE

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

379.00

Transaction ID: B000303S000115L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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☐	13	☐	14	☐	15	☐	16	☐	

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT W. JOHNSON

Mailing Address

408 CEDAR ROAD

City

WINDSOR

State

SC

Zip Code

29856

Date of Receipt

MM / DD / YY
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.39

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

311.60

Transaction ID: B0003026000117L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT W. JOHNSON

Mailing Address

408 CEDAR ROAD

City

WINDSOR

State

SC

Zip Code

29856

Date of Receipt

MM / DD / YY
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

15.39

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VP

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

311.60

Transaction ID: B0003035000117L11A1

Full Name (Last, First, Middle Initial)

C. MARK B. JOHNSTON

Mailing Address

5882 DELOR ST.

City

ST. LOUIS

State

MO

Zip Code

63103

Date of Receipt

MM / DD / YY
10 / 19 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0002875000013L11A1

SUBTOTAL of Receipts This Page (optional)

55.78

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK B. JOHNSTON

Mailing Address

5882 DELOR ST.

City

ST. LOUIS

State

MO

Zip Code

63103

Date of Receipt

11 / 06 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000301S000013L11A1

Full Name (Last, First, Middle Initial)

B. MARK B. JOHNSTON

Mailing Address

5882 DELOR ST.

City

ST. LOUIS

State

MO

Zip Code

63103

Date of Receipt

11 / 20 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000319S000013L11A1

Full Name (Last, First, Middle Initial)

C. MARK B. JOHNSTON

Mailing Address

5882 DELOR ST.

City

ST. LOUIS

State

MO

Zip Code

63103

Date of Receipt

12 / 04 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000331S000013L11A1

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK B. JOHNSTON

Mailing Address

5852 DELOR ST.

City

ST. LOUIS

State

MO

Zip Code

63103

Date of Receipt

12 / 18 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000353S000013L11A1

Full Name (Last, First, Middle Initial)

B. JOHN MICHAEL JOYCE, JR.

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

10 / 12 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000283S000027L11A1

Full Name (Last, First, Middle Initial)

C. JOHN MICHAEL JOYCE, JR.

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

10 / 26 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000291S000028L11A1

SUBTOTAL of Receipts This Page (optional) ▶

41.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN MICHAEL JOYCE, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 09 / 2001

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000308S000026L11A1

Full Name (Last, First, Middle Initial)

B. JOHN MICHAEL JOYCE, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000320S000026L11A1

Full Name (Last, First, Middle Initial)

C. JOHN MICHAEL JOYCE, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
12 / 07 / 2001

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000345S000026L11A1

SUBTOTAL of Receipts This Page (optional)

24.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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or each category of the
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN MICHAEL JOYCE, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 21 / 2001

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000363S000026L11A1

Full Name (Last, First, Middle Initial)

B. JERRY LEWIS JUNEAU

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 23 / 2001

Amount of Each Receipt this Period

16.67

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

200.04

Transaction ID: B000328S000057L11A1

Full Name (Last, First, Middle Initial)

C. JERRY LEWIS JUNEAU

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

16.67

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

200.04

Transaction ID: B000335S000057L11A1

SUBTOTAL of Receipts This Page (optional)

41.34

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CALVIN E. KELLOGG

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

N M / D E / Y Y Y Y
11 05 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B000298S000019L11A1

Full Name (Last, First, Middle Initial)

B. CALVIN E. KELLOGG

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

N M / D E / Y Y Y Y
11 05 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B000299S000019L11A1

Full Name (Last, First, Middle Initial)

C. CALVIN E. KELLOGG

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

N M / D E / Y Y Y Y
11 23 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B000326S000019L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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Detailed Summary Page

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BARBARA A. KELLY

Mailing Address

11 STOCKTON COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT HR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Transaction ID: B0003026000122L11A1

Full Name (Last, First, Middle Initial)

B. BARBARA A. KELLY

Mailing Address

11 STOCKTON COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT HR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Transaction ID: B0003036000122L11A1

Full Name (Last, First, Middle Initial)

C. GARY KERL

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000334600012L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. GARY KERL

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B0003386000012L11A1

Full Name (Last, First, Middle Initial)

B. RONALD F. KING

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 2 0 0 1

Amount of Each Receipt this Period

17.50

Name of Employer

BC/BS OF OKLAHOMA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0002825000106L11A1

Full Name (Last, First, Middle Initial)

C. RONALD F. KING

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 1 9 2 0 0 1

Amount of Each Receipt this Period

17.50

Name of Employer

BC/BS OF OKLAHOMA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0003155000105L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RONALD F. KING

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 07 / 2001

Amount of Each Receipt this Period

17.50

Name of Employer

BC/BS OF OKLAHOMA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Transaction ID: B0003426000104L11A1

Full Name (Last, First, Middle Initial)

B. THOMAS KINSER

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 23 / 2001

Amount of Each Receipt this Period

35.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0003285000082L11A1

Full Name (Last, First, Middle Initial)

C. THOMAS KINSER

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

35.00

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Transaction ID: B0003365000082L11A1

SUBTOTAL of Receipts This Page (optional) ▶

87.50

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial) ROGER W. KLEPPE Mailing Address 2901 MEAD CT. City State Zip Code BURNSVILLE MN 55337 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 364.00		Date of Receipt N M / D E / Y Y Y Y 11 10 2001 Amount of Each Receipt this Period 14.00 Transaction ID: B000314S000007L11A1
B. Full Name (Last, First, Middle Initial) ROGER W. KLEPPE Mailing Address 2901 MEAD CT. City State Zip Code BURNSVILLE MN 55337 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 364.00		Date of Receipt N M / D E / Y Y Y Y 12 05 2001 Amount of Each Receipt this Period 14.00 Transaction ID: B000336S000007L11A1
C. Full Name (Last, First, Middle Initial) ROGER W. KLEPPE Mailing Address 2901 MEAD CT. City State Zip Code BURNSVILLE MN 55337 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 364.00		Date of Receipt N M / D E / Y Y Y Y 12 05 2001 Amount of Each Receipt this Period 14.00 Transaction ID: B000337S000007L11A1

SUBTOTAL of Receipts This Page (optional) ▶ 42.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial) ROGER W. KLEPPE		Date of Receipt N M / D E / Y Y Y Y 1 2 / 0 5 / 2 0 0 1	
Mailing Address 2801 MEAD CT.			
City	State	Zip Code	
BURNSVILLE	MN	55337	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 14.00	
Name of Employer BC/BS OF MINNESOTA		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 364.00	
		Transaction ID: B000341S000007L11A1	
B. Full Name (Last, First, Middle Initial) ROGER W. KLEPPE		Date of Receipt N M / D E / Y Y Y Y 1 2 / 2 7 / 2 0 0 1	
Mailing Address 2801 MEAD CT.			
City	State	Zip Code	
BURNSVILLE	MN	55337	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 14.00	
Name of Employer BC/BS OF MINNESOTA		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 364.00	
		Transaction ID: B000359S000007L11A1	
C. Full Name (Last, First, Middle Initial) MARK KOCHANOWSKI		Date of Receipt N M / D E / Y Y Y Y 1 2 / 0 5 / 2 0 0 1	
Mailing Address 1310 G STREET, N.W.			
City	State	Zip Code	
WASHINGTON	DC	20001	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 10.00	
Name of Employer BC/BS OF WESTERN NEW YORK		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	
		Transaction ID: B000334S000013L11A1	

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

TOTAL This Period (last page this line number only) **38.00**

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARK KOCHANOWSKI

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B0003386000013L11A1

Full Name (Last, First, Middle Initial)

B. ALLAN M. KORN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CHIEF MEDICAL DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B0002835000028L11A1

Full Name (Last, First, Middle Initial)

C. ALLAN M. KORN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CHIEF MEDICAL DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B0002915000027L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ALLAN M. KORN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 09 / 2001

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CHIEF MEDICAL DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Transaction ID: B000308S000027L11A1

Full Name (Last, First, Middle Initial)

B. ALLAN M. KORN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 23 / 2001

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CHIEF MEDICAL DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Transaction ID: B000320S000027L11A1

Full Name (Last, First, Middle Initial)

C. ALLAN M. KORN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 07 / 2001

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CHIEF MEDICAL DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B000345S000027L11A1

SUBTOTAL of Receipts This Page (optional) ▶

75.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ALLAN M. KORN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 21 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CHIEF MEDICAL DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Transaction ID: B000363S000027L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN H. LAPIERRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

10 / 12 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000283S000029L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN H. LAPIERRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

10 / 26 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000291S000029L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

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

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN N. LAPIERRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 09 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000308S000028L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN N. LAPIERRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000320S000028L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN N. LAPIERRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000345S000028L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN N. LAPIERRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 21 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

EXECUTIVE REPRESENTATIVE

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000363S000028L11A1

Full Name (Last, First, Middle Initial)

B. MARY N. LEHNARD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

10 / 12 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

115.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Transaction ID: B000283S000031L11A1

Full Name (Last, First, Middle Initial)

C. MARY N. LEHNARD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

10 / 26 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

115.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Transaction ID: B000291S000030L11A1

SUBTOTAL of Receipts This Page (optional)

240.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARY N. LEHNARD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 9 / 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

115.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Transaction ID: B000308S000030L11A1

Full Name (Last, First, Middle Initial)

B. MARY N. LEHNARD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

115.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Transaction ID: B000320S000030L11A1

Full Name (Last, First, Middle Initial)

C. MARY N. LEHNARD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

115.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Transaction ID: B000345S000030L11A1

SUBTOTAL of Receipts This Page (optional)

345.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARY N. LEHNARD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

115.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

SENIOR V.P.

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

2990.00

Transaction ID: B000363S000030L11A1

Full Name (Last, First, Middle Initial)

B. JAMES C. LEVAN

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

19.20

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.40

Transaction ID: B000328S000008L11A1

Full Name (Last, First, Middle Initial)

C. JAMES C. LEVAN

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

19.20

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.40

Transaction ID: B000335S000008L11A1

SUBTOTAL of Receipts This Page (optional)

153.40

TOTAL This Period (last page this line number only)

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMES LINDEL

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

10 / 26 / 2001

Amount of Each Receipt this Period

14.00

Name of Employer
BC/BS OF VERMONT

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

206.50

Transaction ID: B0002926000002L11A1

Full Name (Last, First, Middle Initial)

B. JAMES LINDEL

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 13 / 2001

Amount of Each Receipt this Period

14.00

Name of Employer
BC/BS OF VERMONT

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

206.50

Transaction ID: B000310S000002L11A1

Full Name (Last, First, Middle Initial)

C. JAMES LINDEL

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 17 / 2001

Amount of Each Receipt this Period

21.00

Name of Employer
BC/BS OF VERMONT

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

206.50

Transaction ID: B000349S000002L11A1

SUBTOTAL of Receipts This Page (optional) ▶

49.00

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

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☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

MM / DD / YYYY
11 / 19 / 2011

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000314S000008L11A1

Full Name (Last, First, Middle Initial)

B. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

MM / DD / YYYY
12 / 05 / 2011

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000336S000008L11A1

Full Name (Last, First, Middle Initial)

C. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

MM / DD / YYYY
12 / 05 / 2011

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000337S000008L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003416000008L11A1

Full Name (Last, First, Middle Initial)

B. JANIS L. LYSEN

Mailing Address

2849 42ND AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55406

Date of Receipt

12 / 27 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003595000008L11A1

Full Name (Last, First, Middle Initial)

C. MARK MAGDOUGAL

Mailing Address

287 WATEREE RIVER ROAD

City

SURFSIDE BEACH

State

SC

Zip Code

29675

Date of Receipt

11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Transaction ID: B0003029000135L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

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

A. MARK MACDOUGAL Full Name (Last, First, Middle Initial) Mailing Address 287 WATEREE RIVER ROAD City State Zip Code SURFSIDE BEACH SC 29575 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF SOUTH CAROLINA DIRECTOR Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 310.00		Date of Receipt N M / D E / Y Y Y Y 11 13 2001 Amount of Each Receipt this Period 20.00 Transaction ID: B000303S000135L11A1
B. DEBORAH BURNMADSEN Full Name (Last, First, Middle Initial) Mailing Address 1124 ORCHARD PLACE City State Zip Code MENDOTA HEIGHTS MN 55118 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 390.00		Date of Receipt N M / D E / Y Y Y Y 11 18 2001 Amount of Each Receipt this Period 15.00 Transaction ID: B000314S000009L11A1
C. DEBORAH BURNMADSEN Full Name (Last, First, Middle Initial) Mailing Address 1124 ORCHARD PLACE City State Zip Code MENDOTA HEIGHTS MN 55118 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 390.00		Date of Receipt N M / D E / Y Y Y Y 12 05 2001 Amount of Each Receipt this Period 15.00 Transaction ID: B000336S000009L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **50.00**
TOTAL This Period (last page this line number only) ▶

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000337S000009L11A1

Full Name (Last, First, Middle Initial)

B. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000341S000009L11A1

Full Name (Last, First, Middle Initial)

C. DEBORAH BURNMADSEN

Mailing Address

1124 ORCHARD PLACE

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

15.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000359S000009L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. GARY MAIENSCHIN

Mailing Address

3551 GETTYSBURG PL.

City

JEFFERSON CITY

State

MO

Zip Code

65109

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0002876000016L11A1

Full Name (Last, First, Middle Initial)

B. GARY MAIENSCHIN

Mailing Address

3551 GETTYSBURG PL.

City

JEFFERSON CITY

State

MO

Zip Code

65109

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003015000016L11A1

Full Name (Last, First, Middle Initial)

C. GARY MAIENSCHIN

Mailing Address

3551 GETTYSBURG PL.

City

JEFFERSON CITY

State

MO

Zip Code

65109

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003195000016L11A1

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. GARY MAJENSCHIN

Mailing Address

3551 GETTYSBURG PL.

City

State

Zip Code

JEFFERSON CITY

MO

65109

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 4 2 0 0 1

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003316000016L11A1

Full Name (Last, First, Middle Initial)

B. GARY MAJENSCHIN

Mailing Address

3551 GETTYSBURG PL.

City

State

Zip Code

JEFFERSON CITY

MO

65109

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003536000016L11A1

Full Name (Last, First, Middle Initial)

C. MARY P. MAZZOLA

Mailing Address

849 BURWELL LANE

City

State

Zip Code

COLUMBIA

SC

29205

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BCBS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B00030260000143L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MARY P. MAZZOLA

Mailing Address

849 BURWELL LANE

City

COLUMBIA

State

SC

Zip Code

29205

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000303S000143L11A1

Full Name (Last, First, Middle Initial)

B. RAYMOND F. MCCASKEY

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Transaction ID: B000324S000033L11A1

Full Name (Last, First, Middle Initial)

C. RAYMOND F. MCCASKEY

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 / 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Transaction ID: B000340S000034L11A1

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RAYMOND F. MCCASKEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

75.00

Name of Employer
BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Transaction ID: B000350S000034L11A1

Full Name (Last, First, Middle Initial)

B. NORA MCGUIRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000334S000014L11A1

Full Name (Last, First, Middle Initial)

C. NORA MCGUIRE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer
BC/BS OF WESTERN NEW YORK

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Transaction ID: B000336S000014L11A1

SUBTOTAL of Receipts This Page (optional)

95.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LES MEHRTENS

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

N M / D C / Y Y Y Y
1 0 / 2 4 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF MISSOURI

Occupation

VP HUMAN RESOURCES

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0002896000006L11A1

Full Name (Last, First, Middle Initial)

B. LES MEHRTENS

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF MISSOURI

Occupation

VP HUMAN RESOURCES

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0003075000006L11A1

Full Name (Last, First, Middle Initial)

C. LES MEHRTENS

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

N M / D C / Y Y Y Y
1 1 / 1 9 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer

BC/BS OF MISSOURI

Occupation

VP HUMAN RESOURCES

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0003175000006L11A1

SUBTOTAL of Receipts This Page (optional)

90.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LES MEHRTENS

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer
BC/BS OF MISSOURI

Occupation

VP HUMAN RESOURCES

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0003326000006L11A1

Full Name (Last, First, Middle Initial)

B. LES MEHRTENS

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

12 / 18 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

30.00

Name of Employer
BC/BS OF MISSOURI

Occupation

VP HUMAN RESOURCES

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0003545000006L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAMMEYER

Mailing Address

2737 CYPRESS BEND ROAD

City

FLORENCE

State

SC

Zip Code

29506

Date of Receipt

11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

58.00

Name of Employer
BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

842.76

Transaction ID: B0003025000155L11A1

SUBTOTAL of Receipts This Page (optional)

118.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WILLIAM MEYER

Mailing Address

2737 CYPRESS BEND ROAD

City

FLORENCE

State

SC

Zip Code

29506

Date of Receipt

MM / DD / YY
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

58.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

842.76

Transaction ID: B0003036000155L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

MM / DD / YY
11 / 18 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003145000011L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

APPLE VALLEY

State

MN

Zip Code

55124

Date of Receipt

MM / DD / YY
12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003365000011L11A1

SUBTOTAL of Receipts This Page (optional)

78.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

State

Zip Code

APPLE VALLEY

MN

55124

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000337S000011L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

State

Zip Code

APPLE VALLEY

MN

55124

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000341S000011L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT J. MILIS

Mailing Address

7915 LOWER 139 CT. W.

City

State

Zip Code

APPLE VALLEY

MN

55124

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000359S000011L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID J. MILLER

Mailing Address

1850 CELIA RD.

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000314S000012L11A1

Full Name (Last, First, Middle Initial)

B. DAVID J. MILLER

Mailing Address

1850 CELIA RD.

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000336S000012L11A1

Full Name (Last, First, Middle Initial)

C. DAVID J. MILLER

Mailing Address

1850 CELIA RD.

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000337S000012L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DAVID J. MILLER

Mailing Address

1850 CELIA RD.

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000341S000012L11A1

Full Name (Last, First, Middle Initial)

B. DAVID J. MILLER

Mailing Address

1850 CELIA RD.

City

State

Zip Code

MENDOTA HEIGHTS

MN

55118

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000359S000012L11A1

Full Name (Last, First, Middle Initial)

C. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

State

Zip Code

EAGAN

MN

55123

FEC ID number of contributing
federal political committee.

Date of Receipt

11 / 19 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000314S000013L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

State

Zip Code

EAGAN

MN

55123

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Transaction ID: B000336S000013L11A1

Full Name (Last, First, Middle Initial)

B. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

State

Zip Code

EAGAN

MN

55123

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Transaction ID: B000337S000013L11A1

Full Name (Last, First, Middle Initial)

C. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

State

Zip Code

EAGAN

MN

55123

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Transaction ID: B000341S000013L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN ANN MOCK

Mailing Address

3766 WESCOTT HILLS D

City

EAGAN

State

MN

Zip Code

55123

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003596000013L11A1

Full Name (Last, First, Middle Initial)

B. PATRICIA E. MONAHAN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Transaction ID: B0002835000032L11A1

Full Name (Last, First, Middle Initial)

C. PATRICIA E. MONAHAN

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Transaction ID: B0002915000031L11A1

SUBTOTAL of Receipts This Page (optional)

38.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA E. MONAHAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

MM / DD / YYYY
11 / 09 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Transaction ID: B000308S000031L11A1

Full Name (Last, First, Middle Initial)

B. PATRICIA E. MONAHAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Transaction ID: B000320S000031L11A1

Full Name (Last, First, Middle Initial)

C. PATRICIA E. MONAHAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

MM / DD / YYYY
12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Transaction ID: B000345S000031L11A1

SUBTOTAL of Receipts This Page (optional)

42.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PATRICIA E. MONAHAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 21 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

14.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

364.00

Transaction ID: B000363S000031L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL J. MORROW

Mailing Address

3744 HUNTINGTON AV. S.

City

State

Zip Code

ST. LOUIS PARK

MN

55416

Date of Receipt

11 / 18 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000314S000014L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL J. MORROW

Mailing Address

3744 HUNTINGTON AV. S.

City

State

Zip Code

ST. LOUIS PARK

MN

55416

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000336S000014L11A1

SUBTOTAL of Receipts This Page (optional)

34.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL J. MORROW

Mailing Address

3744 HUNTINGTON AV. S.

City

State

Zip Code

ST. LOUIS PARK

MN

55416

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000337S000014L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL J. MORROW

Mailing Address

3744 HUNTINGTON AV. S.

City

State

Zip Code

ST. LOUIS PARK

MN

55416

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000341S000014L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL J. MORROW

Mailing Address

3744 HUNTINGTON AV. S.

City

State

Zip Code

ST. LOUIS PARK

MN

55416

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2001

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000359S000014L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

PAGE 112 / 201

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. LISA T. MURPHY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

ATTORNEY

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Transaction ID: B0002836000033L11A1

Full Name (Last, First, Middle Initial)

B. LISA T. MURPHY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

ATTORNEY

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Transaction ID: B0002915000032L11A1

Full Name (Last, First, Middle Initial)

C. HELEN B. MURRAY

Mailing Address

392 STONERIDGE COURT

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

338.00

Transaction ID: B0003025000161L11A1

SUBTOTAL of Receipts This Page (optional)

74.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 113 / 201

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

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

A. Full Name (Last, First, Middle Initial)
HELEN B. MURRAY
Mailing Address
382 STONERIDGE COURT
City State Zip Code
BLYTHEWOOD SC 29016
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA MANAGER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 338.00

Date of Receipt
M M / D D / Y Y Y Y
11 13 2001

Amount of Each Receipt this Period
50.00

Transaction ID: B000303S000161L11A1

B. Full Name (Last, First, Middle Initial)
KENNETH M. NELSON
Mailing Address
124 WHITE BIRCH CIRCLE
City State Zip Code
COLUMBIA SC 29223
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA ASSOC MEDICAL DIRECTOR
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
11 13 2001

Amount of Each Receipt this Period
12.00

Transaction ID: B000302S000183L11A1

C. Full Name (Last, First, Middle Initial)
KENNETH M. NELSON
Mailing Address
124 WHITE BIRCH CIRCLE
City State Zip Code
COLUMBIA SC 29223
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA ASSOC MEDICAL DIRECTOR
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
11 13 2001

Amount of Each Receipt this Period
12.00

Transaction ID: B000303S000183L11A1

SUBTOTAL of Receipts This Page (optional) ▶ 74.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

11 / 10 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Transaction ID: B000314S000015L11A1

Full Name (Last, First, Middle Initial)

B. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Transaction ID: B000336S000015L11A1

Full Name (Last, First, Middle Initial)

C. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Transaction ID: B000337S000015L11A1

SUBTOTAL of Receipts This Page (optional)

54.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Transaction ID: B000341S000015L11A1

Full Name (Last, First, Middle Initial)

B. NANCY F. NELSON

Mailing Address

1781 TAMBERWOOD TR.

City

WOODBURY

State

MN

Zip Code

55125

Date of Receipt

12 / 27 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

18.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

468.00

Transaction ID: B000359S000015L11A1

Full Name (Last, First, Middle Initial)

C. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

11 / 19 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000314S000016L11A1

SUBTOTAL of Receipts This Page (optional) ▶

46.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000336S000016L11A1

Full Name (Last, First, Middle Initial)

B. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000337S000016L11A1

Full Name (Last, First, Middle Initial)

C. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000341S000016L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RICHARD P. NEUNER

Mailing Address

5005 NEWTON AVE. S.

City

MINNEAPOLIS

State

MN

Zip Code

55419

Date of Receipt

N M / D E / Y Y Y Y
12 / 27 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000359S000016L11A1

Full Name (Last, First, Middle Initial)

B. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

Date of Receipt

N M / D E / Y Y Y Y
11 / 19 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Transaction ID: B000314S000017L11A1

Full Name (Last, First, Middle Initial)

C. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

Date of Receipt

N M / D E / Y Y Y Y
12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Transaction ID: B000336S000017L11A1

SUBTOTAL of Receipts This Page (optional)

110.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Transaction ID: B000337S000017L11A1

Full Name (Last, First, Middle Initial)

B. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Transaction ID: B000341S000017L11A1

Full Name (Last, First, Middle Initial)

C. RICHARD M. NIEMIEC

Mailing Address

4239 HARRIET AVE.

City

MINNEAPOLIS

State

MN

Zip Code

55409

Date of Receipt

12 / 27 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Transaction ID: B000359S000017L11A1

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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☐ 13	☐ 14	☐ 15	☐ 16	

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHAD NILES

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000321S000011L11A1

Full Name (Last, First, Middle Initial)

B. CHAD NILES

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000327S000011L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM J. ODOM

Mailing Address

287 WATEREE RIVER ROAD

City

SURFSIDE BEACH

State

SC

Zip Code

29575

Date of Receipt

MM / DD / YYYY
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

5.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000302S000106L11A1

SUBTOTAL of Receipts This Page (optional)

45.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
or each category of the
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NAME OF COMMITTEE (In Full)
BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. Full Name (Last, First, Middle Initial)
WILLIAM J. ODOM
Mailing Address
287 WATEREE RIVER ROAD
City State Zip Code
SURFSIDE BEACH SC 29575
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF SOUTH CAROLINA DIRECTOR
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 220.00

Date of Receipt
M / D / Y Y Y Y
11 / 13 / 2001

Amount of Each Receipt this Period
5.00

Transaction ID: B000303S000166L11A1

B. Full Name (Last, First, Middle Initial)
JOHN N. DUNJIAN
Mailing Address
1314 MARQUETTE AVE. #3105
City State Zip Code
MINNEAPOLIS MN 55403
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF MINNESOTA HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 520.00

Date of Receipt
M / D / Y Y Y Y
11 / 13 / 2001

Amount of Each Receipt this Period
20.00

Transaction ID: B000314S000018L11A1

C. Full Name (Last, First, Middle Initial)
JOHN N. DUNJIAN
Mailing Address
1314 MARQUETTE AVE. #3105
City State Zip Code
MINNEAPOLIS MN 55403
FEC ID number of contributing
federal political committee.
Name of Employer Occupation
BC/BS OF MINNESOTA HEALTH INSURER
Receipt For: Aggregate Year-to-Date ▼
Primary General
Other (specify) ▼ 520.00

Date of Receipt
M / D / Y Y Y Y
12 / 05 / 2001

Amount of Each Receipt this Period
20.00

Transaction ID: B000336S000018L11A1

SUBTOTAL of Receipts This Page (optional) ▶ 45.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000337S000018L11A1

Full Name (Last, First, Middle Initial)

B. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 05 / 2001

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000341S000018L11A1

Full Name (Last, First, Middle Initial)

C. JOHN N. DUNJIAN

Mailing Address

1314 MARQUETTE AVE.

#3105

City

State

Zip Code

MINEAPOLIS

MN

55403

FEC ID number of contributing
federal political committee.

Date of Receipt

12 / 27 / 2001

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Transaction ID: B000359S000018L11A1

SUBTOTAL of Receipts This Page (optional) ▶

60.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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PAGE 122 / 201

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CHARLES PAGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 / 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000284S000009L11A1

Full Name (Last, First, Middle Initial)

B. CHARLES PAGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000316S000009L11A1

Full Name (Last, First, Middle Initial)

C. CHARLES PAGE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000361S000009L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 PAC

Full Name (Last, First, Middle Initial)

A. DAVID S. PANKAU

Mailing Address

145 ALEXANDER CIRCLE

City

COLUMBIA

State

SC

Zip Code

29206

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

215.80

Transaction ID: B000302S000173L11A1

Full Name (Last, First, Middle Initial)

B. DAVID S. PANKAU

Mailing Address

145 ALEXANDER CIRCLE

City

COLUMBIA

State

SC

Zip Code

29206

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

215.80

Transaction ID: B000303S000173L11A1

Full Name (Last, First, Middle Initial)

C. SINDI PARKER

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF VERMONT

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000292S000004L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

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

Full Name (Last, First, Middle Initial)

A. SINDI PARKER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF VERMONT

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B0003106000004L11A1

Full Name (Last, First, Middle Initial)

B. SINDI PARKER

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer
BC/BS OF VERMONT

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Transaction ID: B000349S000004L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL F. PATTON

Mailing Address

4605 VIXEN CIRCLE

City

State

Zip Code

WILDWOOD

MO

63069

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 9 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer
RIGHTCHOICE MANAGED CARE, INC.

Occupation
HEALTH INSURER

Receipt For:

Primary General
Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000287S000019L11A1

SUBTOTAL of Receipts This Page (optional)

65.00

TOTAL This Period (last page this line number only)

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

Full Name (Last, First, Middle Initial)

A. MICHAEL F. PATTON

Mailing Address

4805 VIXEN CIRCLE

City

WILDWOOD

State

MO

Zip Code

63069

Date of Receipt

11 / 06 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000301S000019L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL F. PATTON

Mailing Address

4805 VIXEN CIRCLE

City

WILDWOOD

State

MO

Zip Code

63069

Date of Receipt

11 / 20 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000319S000019L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL F. PATTON

Mailing Address

4805 VIXEN CIRCLE

City

WILDWOOD

State

MO

Zip Code

63069

Date of Receipt

12 / 04 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000331S000019L11A1

SUBTOTAL of Receipts This Page (optional) ▶

75.00

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

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

A. MICHAEL F. PATTON Full Name (Last, First, Middle Initial) Mailing Address 4805 VIXEN CIRCLE City State Zip Code WILDWOOD MO 63069 FEC ID number of contributing federal political committee. Name of Employer RIGHTCHOICE MANAGED CARE, INC. Occupation HEALTH INSURER Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 1 8 / 2 0 0 1 Amount of Each Receipt this Period 25.00 Transaction ID: B000353S000019L11A1
B. TERRY A. PEACE Full Name (Last, First, Middle Initial) Mailing Address 480 OLD FERRY ROAD City State Zip Code CHAPIN SC 29036 FEC ID number of contributing federal political committee. Name of Employer BC/BS OF SOUTH CAROLINA Occupation SR DIRECTOR Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 268.00		Date of Receipt N M / D E / Y Y Y Y 1 1 / 1 3 / 2 0 0 1 Amount of Each Receipt this Period 10.00 Transaction ID: B000302S000176L11A1
C. TERRY A. PEACE Full Name (Last, First, Middle Initial) Mailing Address 480 OLD FERRY ROAD City State Zip Code CHAPIN SC 29036 FEC ID number of contributing federal political committee. Name of Employer BC/BS OF SOUTH CAROLINA Occupation SR DIRECTOR Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 268.00		Date of Receipt N M / D E / Y Y Y Y 1 1 / 1 3 / 2 0 0 1 Amount of Each Receipt this Period 10.00 Transaction ID: B000303S000176L11A1

SUBTOTAL of Receipts This Page (optional) ▶ **45.00**
TOTAL This Period (last page this line number only) ▶

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BRITTIE S. PEARCY

Mailing Address

43 POLO RIDGE CIRCLE

City

State

Zip Code

COLUMBIA

SC

29223

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Transaction ID: B000302S000177L11A1

Full Name (Last, First, Middle Initial)

B. BRITTIE S. PEARCY

Mailing Address

43 POLO RIDGE CIRCLE

City

State

Zip Code

COLUMBIA

SC

29223

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Transaction ID: B000303S000177L11A1

Full Name (Last, First, Middle Initial)

C. E.S. PENDLETON

Mailing Address

570 CHAPMAN LOOP

City

State

Zip Code

PAWLEYS ISLAND

SC

29665

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Amount of Each Receipt this Period

9.00

Transaction ID: B000302S000179L11A1

SUBTOTAL of Receipts This Page (optional)

49.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. E.S. PENDLETON

Mailing Address

570 CHAPMAN LOOP

City

State

Zip Code

PAWLEYS ISLAND

SC

29585

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

9.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003036000179L11A1

Full Name (Last, First, Middle Initial)

B. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

State

Zip Code

DEEPHAVEN

MN

55331

Date of Receipt

N M / D E / Y Y Y Y
11 / 18 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003145000019L11A1

Full Name (Last, First, Middle Initial)

C. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

State

Zip Code

DEEPHAVEN

MN

55331

Date of Receipt

N M / D E / Y Y Y Y
12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003365000019L11A1

SUBTOTAL of Receipts This Page (optional) ▶

29.00

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 / 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003376000019L11A1

Full Name (Last, First, Middle Initial)

B. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 / 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003415000019L11A1

Full Name (Last, First, Middle Initial)

C. TIMOTHY PETERSON

Mailing Address

19865 ANDOVER PLACE

City

DEEPHAVEN

State

MN

Zip Code

55331

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003595000019L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. TROY B. POPE

Mailing Address

504 LONGTOWN ROAD WEST

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ASST VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

11 / 13 / 2001

Amount of Each Receipt this Period

9.00

Transaction ID: B0003026000184L11A1

Full Name (Last, First, Middle Initial)

B. TROY B. POPE

Mailing Address

504 LONGTOWN ROAD WEST

City

State

Zip Code

BLYTHEWOOD

SC

29016

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ASST VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

11 / 13 / 2001

Amount of Each Receipt this Period

9.00

Transaction ID: B0003036000184L11A1

Full Name (Last, First, Middle Initial)

C. JOHN H. PROCTOR, III

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

10 / 15 / 2001

Amount of Each Receipt this Period

20.00

Transaction ID: B0002846000010L11A1

SUBTOTAL of Receipts This Page (optional)

38.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOHN H. PROCTOR, III

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000316S000010L11A1

Full Name (Last, First, Middle Initial)

B. JOHN H. PROCTOR, III

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF MISSISSIPPI

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000361S000009L11A1

Full Name (Last, First, Middle Initial)

C. KAREN G. RALEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000296S000025L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KAREN C. RALEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0002996000024L11A1

Full Name (Last, First, Middle Initial)

B. KAREN C. RALEY

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0003268000024L11A1

Full Name (Last, First, Middle Initial)

C. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

State

Zip Code

ST. PAUL

MN

55105

Date of Receipt

N M / D E / Y Y Y Y
11 / 19 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003148000020L11A1

SUBTOTAL of Receipts This Page (optional)

50.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000336S000020L11A1

Full Name (Last, First, Middle Initial)

B. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000337S000020L11A1

Full Name (Last, First, Middle Initial)

C. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000341S000020L11A1

SUBTOTAL of Receipts This Page (optional) ▶

30.00

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. COLLEEN FOLE REITAN

Mailing Address

295 MACALESTER ST.

City

ST. PAUL

State

MN

Zip Code

55105

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000359S000020L11A1

Full Name (Last, First, Middle Initial)

B. MIKE H. REITZ

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 / 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

60.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Transaction ID: B000285S000011L11A1

Full Name (Last, First, Middle Initial)

C. MIKE H. REITZ

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

60.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Transaction ID: B000306S000011L11A1

SUBTOTAL of Receipts This Page (optional)

130.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MIKE H. REITZ

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

80.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

860.00

Transaction ID: B000347S000011L11A1

Full Name (Last, First, Middle Initial)

B. JOSEPH D. RHAME

Mailing Address

1256 RUDDY DUCK ROAD

City

State

Zip Code

CAMDEN

SC

29020

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000302S000190L11A1

Full Name (Last, First, Middle Initial)

C. JOSEPH D. RHAME

Mailing Address

1256 RUDDY DUCK ROAD

City

State

Zip Code

CAMDEN

SC

29020

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000303S000190L11A1

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

Full Name (Last, First, Middle Initial) A. STEVEN W. RICHARDS Mailing Address 6804 DAKOTA TRAIL City State Zip Code EDINA MN 55439 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 260.00		Date of Receipt N M / D E / Y Y Y Y 1 1 / 1 0 2 0 0 1 Amount of Each Receipt this Period 10.00 Transaction ID: B000314S000021L11A1
Full Name (Last, First, Middle Initial) B. STEVEN W. RICHARDS Mailing Address 6804 DAKOTA TRAIL City State Zip Code EDINA MN 55439 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 260.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 0 5 2 0 0 1 Amount of Each Receipt this Period 10.00 Transaction ID: B000336S000021L11A1
Full Name (Last, First, Middle Initial) C. STEVEN W. RICHARDS Mailing Address 6804 DAKOTA TRAIL City State Zip Code EDINA MN 55439 FEC ID number of contributing federal political committee. Name of Employer Occupation BC/BS OF MINNESOTA HEALTH INSURER Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 260.00		Date of Receipt N M / D E / Y Y Y Y 1 2 / 0 5 2 0 0 1 Amount of Each Receipt this Period 10.00 Transaction ID: B000337S000021L11A1

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

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

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN W. RICHARDS

Mailing Address

6804 DAKOTA TRAIL

City

State

Zip Code

EDINA

MN

55439

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003416000021L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN W. RICHARDS

Mailing Address

6804 DAKOTA TRAIL

City

State

Zip Code

EDINA

MN

55439

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF MINNESOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003595000021L11A1

Full Name (Last, First, Middle Initial)

C. WAYNE T. ROBERTS

Mailing Address

109 EAST SPRINGS ROAD

City

State

Zip Code

COLUMBIA

SC

29223

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

13.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Transaction ID: B0003025000193L11A1

SUBTOTAL of Receipts This Page (optional)

33.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. WAYNE T. ROBERTS

Mailing Address

100 EAST SPRINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

13.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Transaction ID: B000303S000193L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT D. ROSECRANS, JR.

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGING DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B000283S000035L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT D. ROSECRANS, JR.

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGING DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B000291S000034L11A1

SUBTOTAL of Receipts This Page (optional)

63.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT D. ROSECRANS, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 09 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGING DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Transaction ID: B000308S000034L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT D. ROSECRANS, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGING DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B000320S000033L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT D. ROSECRANS, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGING DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Transaction ID: B000345S000033L11A1

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)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT D. ROSECRANS, JR.

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGING DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

850.00

Transaction ID: B000363S000033L11A1

Full Name (Last, First, Middle Initial)

B. WILLIAM F. ROWELL

Mailing Address

112 SILVER LAKE ROAD EAST

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ASST VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Transaction ID: B000302S000196L11A1

Full Name (Last, First, Middle Initial)

C. WILLIAM F. ROWELL

Mailing Address

112 SILVER LAKE ROAD EAST

City

State

Zip Code

COLUMBIA

SC

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

ASST VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Transaction ID: B000303S000196L11A1

SUBTOTAL of Receipts This Page (optional)

46.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. RONALD L. RUSHTON

Mailing Address

106 W BUTLER AVE

City

SALUDA

State

SC

Zip Code

29138

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Transaction ID: B000302S000198L11A1

Full Name (Last, First, Middle Initial)

B. RONALD L. RUSHTON

Mailing Address

106 W BUTLER AVE

City

SALUDA

State

SC

Zip Code

29138

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Transaction ID: B000303S000198L11A1

Full Name (Last, First, Middle Initial)

C. PHILLIP W. SEGUI

Mailing Address

196 ISLAND VIEW COURT

City

LEXINGTON

State

SC

Zip Code

29072

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

9.23

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Transaction ID: B000302S000201L11A1

SUBTOTAL of Receipts This Page (optional)

49.23

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PHILLIP W. SEGUI

Mailing Address

136 ISLAND VIEW COURT

City

State

Zip Code

LEXINGTON

SC

29072

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

9.23

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.75

Transaction ID: B000303S000201L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL F. SEIBOLD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B000324S000050L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL F. SEIBOLD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B000340S000052L11A1

SUBTOTAL of Receipts This Page (optional) ▶

49.23

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

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL F. SEIBOLD

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

30.00

Name of Employer
BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Transaction ID: B0003506000052L11A1

Full Name (Last, First, Middle Initial)

B. SCOTT P. SEROTA

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

197.30

Name of Employer
BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CEO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4271.40

Transaction ID: B000283S000038L11A1

Full Name (Last, First, Middle Initial)

C. SCOTT P. SEROTA

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

197.30

Name of Employer
BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CEO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4271.40

Transaction ID: B000291S000037L11A1

SUBTOTAL of Receipts This Page (optional)

424.60

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SCOTT P. SEROTA

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 09 / 2001

Amount of Each Receipt this Period

197.30

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CEO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4271.40

Transaction ID: B000308S000037L11A1

Full Name (Last, First, Middle Initial)

B. SCOTT P. SEROTA

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

Amount of Each Receipt this Period

197.30

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CEO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4271.40

Transaction ID: B000320S000036L11A1

Full Name (Last, First, Middle Initial)

C. SCOTT P. SEROTA

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

MM / DD / YYYY
12 / 07 / 2001

Amount of Each Receipt this Period

197.30

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CEO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4271.40

Transaction ID: B000345S000036L11A1

SUBTOTAL of Receipts This Page (optional)

591.90

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SCOTT P. SEROTA

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

197.30

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

CEO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

4271.40

Transaction ID: B000363S000036L11A1

Full Name (Last, First, Middle Initial)

B. ROBERT L. SHOPTAW

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

70.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Transaction ID: B000298S000028L11A1

Full Name (Last, First, Middle Initial)

C. ROBERT L. SHOPTAW

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

70.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Transaction ID: B000298S000027L11A1

SUBTOTAL of Receipts This Page (optional)

337.30

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. ROBERT L. SHOPTAW

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

70.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

875.00

Transaction ID: B000326S000027L11A1

Full Name (Last, First, Middle Initial)

B. LAURENCE H. SHOREY

Mailing Address

813 GREEN BAY TRAIL

#229

City

State

Zip Code

MYRTLE BEACH

SC

29577

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

5.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000302S000204L11A1

Full Name (Last, First, Middle Initial)

C. LAURENCE H. SHOREY

Mailing Address

813 GREEN BAY TRAIL

#229

City

State

Zip Code

MYRTLE BEACH

SC

29577

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

5.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Transaction ID: B000303S000204L11A1

SUBTOTAL of Receipts This Page (optional)

80.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN J. SHORT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000298S000029L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN J. SHORT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000299S000028L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN J. SHORT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000326S000028L11A1

SUBTOTAL of Receipts This Page (optional)

60.00

TOTAL This Period (last page this line number only)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. MICHAEL J. SKARUPA

Mailing Address

2868 TROTTER ROAD

City

State

Zip Code

FLORENCE

SC

29501

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

38.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

814.68

Transaction ID: B0003026000205L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL J. SKARUPA

Mailing Address

2868 TROTTER ROAD

City

State

Zip Code

FLORENCE

SC

29501

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

38.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

814.68

Transaction ID: B0003035000205L11A1

Full Name (Last, First, Middle Initial)

C. JOEL N. SLACKMAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0002835000039L11A1

SUBTOTAL of Receipts This Page (optional)

87.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOEL N. SLACKMAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0002916000038L11A1

Full Name (Last, First, Middle Initial)

B. JOEL N. SLACKMAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003085000038L11A1

Full Name (Last, First, Middle Initial)

C. JOEL N. SLACKMAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003205000037L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JOEL N. SLACKMAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003456000037L11A1

Full Name (Last, First, Middle Initial)

B. JOEL N. SLACKMAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 21 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B0003635000037L11A1

Full Name (Last, First, Middle Initial)

C. STEVEN A. SPAULDING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

11 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B0002965000031L11A1

SUBTOTAL of Receipts This Page (optional)

40.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVEN A. SPAULDING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 / 2 0 0 1

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000299S000030L11A1

Full Name (Last, First, Middle Initial)

B. STEVEN A. SPAULDING

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000326S000030L11A1

Full Name (Last, First, Middle Initial)

C. DALE STEGEMAN

Mailing Address

12443 OLIVE BLVD.

City

State

Zip Code

ST. LOUIS

MO

63141

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 2 4 / 2 0 0 1

Amount of Each Receipt this Period

60.00

Name of Employer

BC/BS OF MISSOURI

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Transaction ID: B000299S000008L11A1

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DALE STEGEMAN

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

N M / D C / Y Y Y Y
11 / 07 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

60.00

Name of Employer
BC/BS OF MISSOURI

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Transaction ID: B000307S000008L11A1

Full Name (Last, First, Middle Initial)

B. DALE STEGEMAN

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

N M / D C / Y Y Y Y
11 / 18 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

60.00

Name of Employer
BC/BS OF MISSOURI

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Transaction ID: B000317S000008L11A1

Full Name (Last, First, Middle Initial)

C. DALE STEGEMAN

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

N M / D C / Y Y Y Y
12 / 05 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

60.00

Name of Employer
BC/BS OF MISSOURI

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Transaction ID: B000332S000008L11A1

SUBTOTAL of Receipts This Page (optional)

180.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DALE STEGEMAN

Mailing Address

12443 OLIVE BLVD.

City

ST. LOUIS

State

MO

Zip Code

63141

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

80.00

Name of Employer

BC/BS OF MISSOURI

Occupation

CHIEF MEDICAL OFFICER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Transaction ID: B000354S000008L11A1

Full Name (Last, First, Middle Initial)

B. SHATON T. STRATTON-DOUGHE

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B000324S000054L11A1

Full Name (Last, First, Middle Initial)

C. SHATON T. STRATTON-DOUGHE

Mailing Address

1310 G STREET, N.W.

City

WASHINGTON

State

DC

Zip Code

20001

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

20.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B000340S000056L11A1

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SHATON T. STRATTON-DOLGHE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20001

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

80.00

Name of Employer

BC/BS OF ILLINOIS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Transaction ID: B000350S000056L11A1

Full Name (Last, First, Middle Initial)

B. KATHRYN M. SULLIVAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 2 0 0 1

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Transaction ID: B000285S000009L11A1

Full Name (Last, First, Middle Initial)

C. KATHRYN M. SULLIVAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Transaction ID: B000306S000009L11A1

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

Full Name (Last, First, Middle Initial)

A. KATHRYN M. SULLIVAN

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

40.00

Name of Employer

BC/BS OF LOUISIANA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Transaction ID: B000347S000009L11A1

Full Name (Last, First, Middle Initial)

B. BERNARD M. TALBERT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B000283S000040L11A1

Full Name (Last, First, Middle Initial)

C. BERNARD M. TALBERT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B000291S000039L11A1

SUBTOTAL of Receipts This Page (optional)

64.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BERNARD M. TALBERT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

11 / 09 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B000308S000039L11A1

Full Name (Last, First, Middle Initial)

B. BERNARD M. TALBERT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B000320S000039L11A1

Full Name (Last, First, Middle Initial)

C. BERNARD M. TALBERT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

12 / 07 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B000345S000039L11A1

SUBTOTAL of Receipts This Page (optional) ▶

36.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BERNARD M. TALBERT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

12.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Transaction ID: B000363S000038L11A1

Full Name (Last, First, Middle Initial)

B. DEAN S. TODARO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000283S000041L11A1

Full Name (Last, First, Middle Initial)

C. DEAN S. TODARO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000291S000040L11A1

SUBTOTAL of Receipts This Page (optional)

32.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DEAN S. TODARO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 9 / 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000308S000040L11A1

Full Name (Last, First, Middle Initial)

B. DEAN S. TODARO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000320S000039L11A1

Full Name (Last, First, Middle Initial)

C. DEAN S. TODARO

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

DIRECTOR

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Transaction ID: B000345S000039L11A1

SUBTOTAL of Receipts This Page (optional)

30.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

A. Full Name (Last, First, Middle Initial) DEAN S. TODARO		Date of Receipt N M / D C / Y Y Y Y 1 2 / 2 1 2 0 0 1	
Mailing Address 1310 G STREET, N.W. City State Zip Code WASHINGTON DC 20005		Amount of Each Receipt this Period 10.00	
FEC ID number of contributing federal political committee.			
Name of Employer BLUE CROSS/BLUE SHIELD ASSOCIATION		Occupation DIRECTOR	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	
		Transaction ID: B000363S000039L11A1	
B. Full Name (Last, First, Middle Initial) KEITH TOLAR		Date of Receipt N M / D C / Y Y Y Y 1 0 / 1 5 2 0 0 1	
Mailing Address 1310 G STREET, N.W. City State Zip Code WASHINGTON DC 20005		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee.			
Name of Employer ADVANCED HEALTH SYSTEMS, INC.		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	
		Transaction ID: B000284S000002L11A1	
C. Full Name (Last, First, Middle Initial) KEITH TOLAR		Date of Receipt N M / D C / Y Y Y Y 1 1 / 1 9 2 0 0 1	
Mailing Address 1310 G STREET, N.W. City State Zip Code WASHINGTON DC 20005		Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee.			
Name of Employer ADVANCED HEALTH SYSTEMS, INC.		Occupation HEALTH INSURER	
Receipt For: Primary General Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	
		Transaction ID: B000316S000002L11A1	

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

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KEITH TOLAR

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

20.00

Name of Employer

ADVANCED HEALTH SYSTEMS, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Transaction ID: B000361S000002L11A1

Full Name (Last, First, Middle Initial)

B. JUDITH TRIBBELT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000283S0000042L11A1

Full Name (Last, First, Middle Initial)

C. JUDITH TRIBBELT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000291S0000041L11A1

SUBTOTAL of Receipts This Page (optional)

36.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JUDITH TRIBBELT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

MM / DD / YYYY
11 / 09 / 2001

Amount of Each Receipt this Period

8.00

Transaction ID: B000308S000041L11A1

Full Name (Last, First, Middle Initial)

B. JUDITH TRIBBELT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

MM / DD / YYYY
11 / 23 / 2001

Amount of Each Receipt this Period

8.00

Transaction ID: B000320S000040L11A1

Full Name (Last, First, Middle Initial)

C. JUDITH TRIBBELT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

MM / DD / YYYY
12 / 07 / 2001

Amount of Each Receipt this Period

8.00

Transaction ID: B000345S000040L11A1

SUBTOTAL of Receipts This Page (optional)

24.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JUDITH TRIBBELT

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

8.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Transaction ID: B000363S000040L11A1

Full Name (Last, First, Middle Initial)

B. JAMES B. TRIMBLE

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000283S000043L11A1

Full Name (Last, First, Middle Initial)

C. JAMES B. TRIMBLE

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000291S000042L11A1

SUBTOTAL of Receipts This Page (optional)

38.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMES B. TRIMBLE

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 9 / 2 0 0 1

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000308S000042L11A1

Full Name (Last, First, Middle Initial)

B. JAMES B. TRIMBLE

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000320S000041L11A1

Full Name (Last, First, Middle Initial)

C. JAMES B. TRIMBLE

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000345S000041L11A1

SUBTOTAL of Receipts This Page (optional) ▶

45.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. JAMES B. TRIMBLE

Mailing Address

1310 G STREET N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

15.00

Name of Employer

BLUE CROSS/BLUE SHIELD ASSOCIATION

Occupation

MANAGER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Transaction ID: B000363S000041L11A1

Full Name (Last, First, Middle Initial)

B. MICHAEL UNHJEM

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

50.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Transaction ID: B000321S000001L11A1

Full Name (Last, First, Middle Initial)

C. MICHAEL UNHJEM

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

50.00

Name of Employer

NORIDIAN-BC/BS OF NORTH DAKOTA

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Transaction ID: B000327S000001L11A1

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)
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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SANDRA A. VAN TREASE

Mailing Address

1721 KENMOUNT

City

ST. LOUIS

State

MO

Zip Code

63124

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Transaction ID: B0002876000024L11A1

Full Name (Last, First, Middle Initial)

B. SANDRA A. VAN TREASE

Mailing Address

1721 KENMOUNT

City

ST. LOUIS

State

MO

Zip Code

63124

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Transaction ID: B0003015000024L11A1

Full Name (Last, First, Middle Initial)

C. SANDRA A. VAN TREASE

Mailing Address

1721 KENMOUNT

City

ST. LOUIS

State

MO

Zip Code

63124

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Transaction ID: B0003195000024L11A1

SUBTOTAL of Receipts This Page (optional)

150.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SANDRA A. VAN TREASE

Mailing Address

1721 KENMOUNT

City

ST. LOUIS

State

MO

Zip Code

63124

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 4 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Transaction ID: B0003316000024L11A1

Full Name (Last, First, Middle Initial)

B. SANDRA A. VAN TREASE

Mailing Address

1721 KENMOUNT

City

ST. LOUIS

State

MO

Zip Code

63124

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

50.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Transaction ID: B0003535000024L11A1

Full Name (Last, First, Middle Initial)

C. STEVE VONFANGE

Mailing Address

217 EAST SPRINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

11.50

Name of Employer

BCBS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Transaction ID: B0003025000224L11A1

SUBTOTAL of Receipts This Page (optional)

111.50

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEVE VONFANGE

Mailing Address

217 EAST SPRINGS ROAD

City

COLUMBIA

State

SC

Zip Code

29223

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

11.50

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

287.50

Transaction ID: B000303S000224L11A1

Full Name (Last, First, Middle Initial)

B. JERRY W. WARD

Mailing Address

1310 G STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

19.20

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.40

Transaction ID: B000328S000093L11A1

Full Name (Last, First, Middle Initial)

C. JERRY W. WARD

Mailing Address

1310 G STREET N.W.

City

WASHINGTON

State

DC

Zip Code

20005

Date of Receipt

N M / D E / Y Y Y Y
1 2 / 0 5 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

19.20

Name of Employer

BC/BS OF TENNESSEE

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

230.40

Transaction ID: B000335S000093L11A1

SUBTOTAL of Receipts This Page (optional)

49.90

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. PAUL M. WHITE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 / 2 0 0 1

Amount of Each Receipt this Period

40.00

Transaction ID: B0002986000033L11A1

Full Name (Last, First, Middle Initial)

B. PAUL M. WHITE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 / 2 0 0 1

Amount of Each Receipt this Period

40.00

Transaction ID: B0002995000032L11A1

Full Name (Last, First, Middle Initial)

C. PAUL M. WHITE

Mailing Address

1310 G STREET, N.W.

City

State

Zip Code

WASHINGTON

DC

20005

FEC ID number of contributing
federal political committee.

Name of Employer

BC/BS OF ARKANSAS

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Amount of Each Receipt this Period

40.00

Transaction ID: B0003265000032L11A1

SUBTOTAL of Receipts This Page (optional)

120.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. DWIGHT M. WICKER

Mailing Address

1813 BRIGADOONE LANE

City

State

Zip Code

FLORENCE

SC

29505

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

28.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

597.00

Transaction ID: B000302S000232L11A1

Full Name (Last, First, Middle Initial)

B. DWIGHT M. WICKER

Mailing Address

1813 BRIGADOONE LANE

City

State

Zip Code

FLORENCE

SC

29505

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

28.92

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

597.00

Transaction ID: B000303S000232L11A1

Full Name (Last, First, Middle Initial)

C. STEPHEN K. WIGGINS

Mailing Address

510 WINDING WAY

City

State

Zip Code

COLUMBIA

SC

29212

FEC ID number of contributing
federal political committee.

Date of Receipt

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

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT & CIO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000302S000233L11A1

SUBTOTAL of Receipts This Page (optional)

63.84

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. STEPHEN K. WIGGINS

Mailing Address

510 WINDING WAY

City

COLUMBIA

State

SC

Zip Code

29212

Date of Receipt

N M / D E / Y Y Y Y
11 / 13 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

10.00

Name of Employer

BC/BS OF SOUTH CAROLINA

Occupation

SR VICE PRESIDENT & CIO

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Transaction ID: B000303S000233L11A1

Full Name (Last, First, Middle Initial)

B. ROGER G. WILSON

Mailing Address

330 N. JEFFERSON COURT #2004

City

CHICAGO

State

IL

Zip Code

60661

Date of Receipt

N M / D E / Y Y Y Y
12 / 17 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

1000.00

Name of Employer

BLUE CROSS BLUE SHIELD OF OKLAHOMA

Occupation

SENIOR VICE PRESIDENT

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Transaction ID: B000355S000001L11A1

Full Name (Last, First, Middle Initial)

C. KATHLEEN M. ZORIGA

Mailing Address

12912 WEATHERFIELD

City

ST. LOUIS

State

MO

Zip Code

63146

Date of Receipt

N M / D E / Y Y Y Y
10 / 19 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000287S000026L11A1

SUBTOTAL of Receipts This Page (optional)

1035.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN M. ZORICA

Mailing Address

12912 WEATHERFIELD

City

ST. LOUIS

State

MO

Zip Code

63146

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000301S000026L11A1

Full Name (Last, First, Middle Initial)

B. KATHLEEN M. ZORICA

Mailing Address

12912 WEATHERFIELD

City

ST. LOUIS

State

MO

Zip Code

63146

Date of Receipt

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

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000319S000026L11A1

Full Name (Last, First, Middle Initial)

C. KATHLEEN M. ZORICA

Mailing Address

12912 WEATHERFIELD

City

ST. LOUIS

State

MO

Zip Code

63146

Date of Receipt

N M / D C / Y Y Y Y
1 2 / 0 4 2 0 0 1

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B000331S000026L11A1

SUBTOTAL of Receipts This Page (optional)

75.00

TOTAL This Period (last page this line number only)

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

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. KATHLEEN M. ZORICA

Mailing Address

12812 WEATHERFIELD

City

ST. LOUIS

State

MO

Zip Code

63146

Date of Receipt

MM / DD / YYYY
12 / 18 / 2011

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

25.00

Name of Employer

RIGHTCHOICE MANAGED CARE, INC.

Occupation

HEALTH INSURER

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Transaction ID: B0003536000026L11A1

B.

C.

SUBTOTAL of Receipts This Page (optional)

25.00

TOTAL This Period (last page this line number only)

13154.86

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. BLUE CROSS & BLUE SHIELD OF MICHIGAN

Mailing Address

600 E. LAFAYETTE - 1920

City

State

Zip Code

DETROIT

MI

48226

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

16000.00

Date of Receipt

12 / 17 / 2001

Amount of Each Receipt this Period

5000.00

Transaction ID: B000346S000001L12

Full Name (Last, First, Middle Initial)

B. BLUE CROSS & BLUE SHIELD OF MICHIGAN

Mailing Address

600 E. LAFAYETTE - 1920

City

State

Zip Code

DETROIT

MI

48226

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

16000.00

Date of Receipt

12 / 27 / 2001

Amount of Each Receipt this Period

3500.00

Transaction ID: B000357S000001L12

Full Name (Last, First, Middle Initial)

C. BLUE SHIELD OF CALIFORNIA

Mailing Address

50 BEALE STREET

City

State

Zip Code

SAN FRANCISCO

CA

94105

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

11 / 13 / 2001

Amount of Each Receipt this Period

5000.00

Transaction ID: B000312S000001L12

SUBTOTAL of Receipts This Page (optional) ▶

13500.00

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CAREFIRST ASSOCIATES' FEDERAL PAC

Mailing Address

550 12TH STREET, SW

City

State

Zip Code

WASHINGTON

DC

20065

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

N M / D E / Y Y Y Y
1 0 / 1 5 / 2 0 0 1

Amount of Each Receipt this Period

3500.00

Transaction ID: B000286S000001L12

Full Name (Last, First, Middle Initial)

B. CAREFIRST ASSOCIATES' FEDERAL PAC

Mailing Address

550 12TH STREET, SW

City

State

Zip Code

WASHINGTON

DC

20065

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

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

Amount of Each Receipt this Period

1500.00

Transaction ID: B000318S000001L12

Full Name (Last, First, Middle Initial)

C. CAREPAC OF KANSAS BLUE CROSS BLUE SHIELD

Mailing Address

1133 TOPEKA BOULEVARD, SW

City

State

Zip Code

TOPEKA

KS

66629

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

7620.00

Date of Receipt

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

Amount of Each Receipt this Period

635.00

Transaction ID: B000323S000001L12

SUBTOTAL of Receipts This Page (optional)

5635.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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(check only one)

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. CAREPAC OF KANSAS BLUE CROSS BLUE SHIELD

Mailing Address

1133 TOPEKA BOULEVARD, SW

City

TOPEKA

State

KS

Zip Code

66629

Date of Receipt

12 / 05 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

635.00

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

7620.00

Transaction ID: B000339S000001L12

Full Name (Last, First, Middle Initial)

B. CAREPAC OF KANSAS BLUE CROSS BLUE SHIELD

Mailing Address

1133 TOPEKA BOULEVARD, SW

City

TOPEKA

State

KS

Zip Code

66629

Date of Receipt

12 / 27 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

635.00

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

7620.00

Transaction ID: B000356S000001L12

Full Name (Last, First, Middle Initial)

C. FLHEALTH POLITICAL ACTION COMMITTEE

Mailing Address

P.O. BOX 6936

City

JACKSONVILLE

State

FL

Zip Code

32236-6936

Date of Receipt

11 / 23 / 2001

FEC ID number of contributing
federal political committee.

Amount of Each Receipt this Period

3500.00

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

14000.00

Transaction ID: B000322S000001L12

SUBTOTAL of Receipts This Page (optional) ▶

4770.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. HIGHMARK HEALTH PAC

Mailing Address

1800 CENTER STREET

City

State

Zip Code

CAMP HILL

PA

17089-0089

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

10000.00

Date of Receipt

N M / D E / Y Y Y Y
1 1 / 0 5 / 2 0 0 1

Amount of Each Receipt this Period

5000.00

Transaction ID: B0002976000001L12

Full Name (Last, First, Middle Initial)

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

Mailing Address

P.O. BOX 60710

City

State

Zip Code

HARRISBURG

PA

17106-0710

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

8500.00

Date of Receipt

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

Amount of Each Receipt this Period

500.00

Transaction ID: B0003585000001L12

Full Name (Last, First, Middle Initial)

C. REGENGE BLUEPAC

Mailing Address

2890 E. COTTONWOOD PARKWAY DEPT. #8

City

State

Zip Code

SALT LAKE CITY

UT

84121

FEC ID number of contributing
federal political committee.

Name of Employer

Occupation

Receipt For:

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

14000.00

Date of Receipt

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

Amount of Each Receipt this Period

9000.00

Transaction ID: B0003645000001L12

SUBTOTAL of Receipts This Page (optional)

14500.00

TOTAL This Period (last page this line number only)

38405.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in full)
 BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial) A. STEVENS FOR SENATE COMMITTEE			Date of Disbursement 11 / 08 / 2001	
Mailing Address P.O. BOX 100879 City ANCHORAGE State AK Zip Code 99510			Amount of Each Disbursement this Period 4000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name TED STEVENS				
Office Sought: House X Senate President		Disbursement For: 2002 X Primary General Other (specify) ▼		
State: AK District:		Transaction ID: 8000296S000003L23		
Full Name (Last, First, Middle Initial) B. STEVENS FOR SENATE COMMITTEE			Date of Disbursement 11 / 08 / 2001	
Mailing Address P.O. BOX 100879 City ANCHORAGE State AK Zip Code 99510			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name TED STEVENS				
Office Sought: House X Senate President		Disbursement For: 2002 X Primary General Other (specify) ▼		
State: AK District:		Transaction ID: 8000296S000002L23		
Full Name (Last, First, Middle Initial) C. FRIENDS OF BUD CRAMER			Date of Disbursement 10 / 15 / 2001	
Mailing Address P.O. BOX 2821 City HUNTSVILLE State AL Zip Code 35801			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name BUD CRAMER				
Office Sought: X House Senate President		Disbursement For: 2002 X Primary General Other (specify) ▼		
State: AL District: 05		Transaction ID: 8000280S000012L23		
SUBTOTAL of Disbursements This Page (optional) ▶				6000.00
TOTAL This Period (last page this line number only) ▶				

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF SESSIONS SENATE COMMITTEE

Mailing Address

P.O. BOX 4278

City

MONTGOMERY

State

AL

Zip Code

36103

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

JEFF SESSIONS

24K

Category/
Type

Office Sought:

House

☒ Senate

President

Disbursement For:

2002

☒ Primary

General

Other (specify) ▼

State: AL

District:

Date of Disbursement

10 / 15 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000280S000005L23

Full Name (Last, First, Middle Initial)

B. HUTCHINSON FOR SENATE

Mailing Address

128 NORTH 13TH STREET

City

ROGERS

State

AR

Zip Code

72758

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

TIM HUTCHINSON

24K

Category/
Type

Office Sought:

House

☒ Senate

President

Disbursement For:

2002

☒ Primary

General

Other (specify) ▼

State: AR

District:

Date of Disbursement

10 / 15 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000280S000008L23

Full Name (Last, First, Middle Initial)

C. HUTCHINSON FOR SENATE

Mailing Address

128 NORTH 13TH STREET

City

ROGERS

State

AR

Zip Code

72758

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

TIM HUTCHINSON

24K

Category/
Type

Office Sought:

House

☒ Senate

President

Disbursement For:

2002

☒ Primary

General

Other (specify) ▼

State: AR

District:

Date of Disbursement

12 / 05 / 2001

Amount of Each Disbursement this Period

625.00

Transaction ID: B000330S000008L23

SUBTOTAL of Disbursements This Page (optional) ▶

2625.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

Full Name (Last, First, Middle Initial) A. JOHN SHADEGG FOR CONGRESS		Date of Disbursement 12 / 14 / 2001	
Mailing Address 2016 MOUNT VERNON AVENUE 3RD FLOOR City State Zip Code ALEXANDRIA VA 22301		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name JOHN SHADEGG			
Office Sought: ☒ House ☐ Senate ☐ President	Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: AZ District: 04	Transaction ID: B000343S000004L23		
Full Name (Last, First, Middle Initial) B. CONGRESSIONAL MAJORITY COMMITTEE		Date of Disbursement 10 / 15 / 2001	
Mailing Address P.O. BOX 23861 City State Zip Code ALEXANDRIA VA 22304		Amount of Each Disbursement this Period -1000.00	
Purpose of Disbursement 2001 GENERAL/VOID		24K Category/ Type	
Candidate Name			
Office Sought: House ☐ Senate ☐ President	Disbursement For: 2001 Primary ☒ General Other (specify) ▼		
State: District:	Transaction ID: B000281S000001L23		
Full Name (Last, First, Middle Initial) C. CONGRESSIONAL MAJORITY COMMITTEE		Date of Disbursement 12 / 14 / 2001	
Mailing Address P.O. BOX 23861 City State Zip Code ALEXANDRIA VA 22304		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2001 GENERAL ELECTION		24K Category/ Type	
Candidate Name			
Office Sought: House ☐ Senate ☐ President	Disbursement For: 2001 Primary ☐ General ☒ Other (specify) ▼		
State: District:	Transaction ID: B000343S000008L23		
SUBTOTAL of Disbursements This Page (optional) ▶		1000.00	
TOTAL This Period (last page this line number only) ▶			

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in full)
 BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial) A. DEVIN NUNES FOR CONGRESS			Date of Disbursement 12 / 05 / 2001	
Mailing Address P.O. BOX 891 City PIXLEY State CA Zip Code 93256			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name DEVIN NUNES				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: CA District: 21		Transaction ID: 8000330S000003L23		
Full Name (Last, First, Middle Initial) B. WAYNE ALLARD FOR U.S. SENATE			Date of Disbursement 12 / 05 / 2001	
Mailing Address C/O BATTLE BORN CLASIC 1155 21ST STREET, NW, STE.300 City WASHINGTON State DC Zip Code 20036			Amount of Each Disbursement this Period 625.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name WAYNE ALLARD				
Office Sought: ☐ House ☒ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: CO District:		Transaction ID: 8000330S000003L23		
Full Name (Last, First, Middle Initial) C. FRIENDS OF SCOTT MCINNIS, INC.			Date of Disbursement 10 / 24 / 2001	
Mailing Address P.O. BOX 3157 City GRAND JUNCTION State CO Zip Code 81502			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name SCOTT MCINNIS				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: CO District: 03		Transaction ID: 8000288S000003L23		
SUBTOTAL of Disbursements This Page (optional) ▶				2625.00
TOTAL This Period (last page this line number only) ▶				

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

Full Name (Last, First, Middle Initial) A. RE-ELECT NANCY JOHNSON TO CONGRESS			Date of Disbursement 11 / 06 / 2001	
Mailing Address 601 FARMINGTON AVENUE City NEW BRITAIN State CT Zip Code 06053			Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name NANCY JOHNSON				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary ☐ General Other (specify) ▼		
State: CT District: 06		Transaction ID: B000296S000001L23		
Full Name (Last, First, Middle Initial) B. AMERICAN SUCCESS PAC			Date of Disbursement 12 / 14 / 2001	
Mailing Address 1155 21ST STREET, NW SUITE 300 City WASHINGTON State DC Zip Code 20036			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: ☐ House ☐ Senate ☐ President		Disbursement For: 2001 ☐ Primary ☒ General Other (specify) ▼		
State: District:		Transaction ID: B000343S000003L23		
Full Name (Last, First, Middle Initial) C. BATTLE BORN PAC			Date of Disbursement 12 / 05 / 2001	
Mailing Address 1155 21ST STREET, NW SUITE 300 City WASHINGTON State DC Zip Code 20036			Amount of Each Disbursement this Period 625.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: ☐ House ☐ Senate ☐ President		Disbursement For: 2001 ☐ Primary ☒ General Other (specify) ▼		
State: District:		Transaction ID: B000330S000010L23		
SUBTOTAL of Disbursements This Page (optional) ▶			3625.00	
TOTAL This Period (last page this line number only) ▶				

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
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NAME OF COMMITTEE (in full)
 BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial) A. IMPACT AMERICA			Date of Disbursement 12 / 14 / 2001	
Mailing Address 228 S. WASHINGTON STREET SUITE 200 City State Zip Code ALEXANDRIA VA 22314			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: ☐ House ☐ Senate ☐ President	Disbursement For: 2001 ☐ Primary ☒ General Other (specify) ▼		Transaction ID: B000343S000005L23	
State: District:				
Full Name (Last, First, Middle Initial) B. PIONEER PAC			Date of Disbursement 12 / 05 / 2001	
Mailing Address 3323 N. WASHINGTON BLVD. City State Zip Code ARLINGTON VA 22201			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: ☐ House ☐ Senate ☐ President	Disbursement For: 2001 ☐ Primary ☒ General Other (specify) ▼		Transaction ID: B000330S000002L23	
State: District:				
Full Name (Last, First, Middle Initial) C. JIM DAVIS FOR CONGRESS			Date of Disbursement 10 / 15 / 2001	
Mailing Address P.O. BOX 836 City State Zip Code ANNANDALE VA 22203			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name JIM DAVIS				
Office Sought: ☒ House ☐ Senate ☐ President	Disbursement For: 2002 ☒ Primary ☐ General Other (specify) ▼		Transaction ID: B000280S000010L23	
State: FL District: 11				

SUBTOTAL of Disbursements This Page (optional) **3000.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

Full Name (Last, First, Middle Initial) A. FEENEY CONGRESSIONAL EXPLORATORY CMTE			Date of Disbursement 11 / 02 / 2001	
Mailing Address P.O. BOX 622345 City: OVIEDO State: FL Zip Code: 32762			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name TOM FEENEY				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: FL District:		Transaction ID: B000295S000003L23		
Full Name (Last, First, Middle Initial) B. FRIENDS OF MARK FOLEY			Date of Disbursement 10 / 15 / 2001	
Mailing Address P.O. BOX 30505 City: PALM BEACH GARDENS State: FL Zip Code: 33420			Amount of Each Disbursement this Period -2000.00	
Purpose of Disbursement 2002 PRIMARY/VOID			24K Category/ Type	
Candidate Name MARK FOLEY				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: FL District: 16		Transaction ID: B000281S000002L23		
Full Name (Last, First, Middle Initial) C. FRIENDS OF MARK FOLEY			Date of Disbursement 11 / 02 / 2001	
Mailing Address P.O. BOX 30505 City: PALM BEACH GARDENS State: FL Zip Code: 33420			Amount of Each Disbursement this Period 3000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name MARK FOLEY				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: FL District: 16		Transaction ID: B000295S000001L23		
SUBTOTAL of Disbursements This Page (optional) ▶			2000.00	
TOTAL This Period (last page this line number only) ▶				

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

Full Name (Last, First, Middle Initial) A. CITIZENS FOR HARKIN			Date of Disbursement 12 / 05 / 2001	
Mailing Address P.O. BOX 811 City DES MOINES State IA Zip Code 50304			Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name TOM HARKIN				
Office Sought: House X Senate President		Disbursement For: 2002 X Primary General Other (specify) ▼		
State: IA District:		Transaction ID: B000330S000001L23		
Full Name (Last, First, Middle Initial) B. LATHAM FOR CONGRESS			Date of Disbursement 10 / 24 / 2001	
Mailing Address P.O. BOX 174 City SIOUX CITY State IA Zip Code 51102			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name TOM LATHAM				
Office Sought: X House Senate President		Disbursement For: 2002 X Primary General Other (specify) ▼		
State: IA District: 05		Transaction ID: B000286S000001L23		
Full Name (Last, First, Middle Initial) C. ALEXA FOR CONGRESS			Date of Disbursement 11 / 19 / 2001	
Mailing Address 499 S. CAPITOL STREET, SW #803 City WASHINGTON State DC Zip Code 20003			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name WILLIAM ALEXA				
Office Sought: X House Senate President		Disbursement For: 2002 X Primary General Other (specify) ▼		
State: IN District: 02		Transaction ID: B000313S000002L23		

SUBTOTAL of Disbursements This Page (optional) **4000.00**

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

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

Full Name (Last, First, Middle Initial) A. BROSE MCVEY FOR CONGRESS		Date of Disbursement 12 / 14 / 2001	
Mailing Address ONE AMERICAN SQUARE, SUITE 200 BOX 82064 City: INDIANAPOLIS State: IN Zip Code: 46282		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name BROSE MCVEY			
Office Sought: ☒ House ☐ Senate ☐ President	Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: IN District: 10	Transaction ID: 8000343S000012L23		
Full Name (Last, First, Middle Initial) B. THE MIKE PENCE COMMITTEE		Date of Disbursement 10 / 24 / 2001	
Mailing Address P.O. BOX 408 City: ANDERSON State: IN Zip Code: 46018		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name MIKE PENCE			
Office Sought: ☒ House ☐ Senate ☐ President	Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: IN District: 02	Transaction ID: 8000288S000005L23		
Full Name (Last, First, Middle Initial) C. PAT ROBERTS FOR SENATE		Date of Disbursement 12 / 05 / 2001	
Mailing Address P.O. BOX 433 City: GREAT BEND State: KS Zip Code: 67530		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name PAT ROBERTS			
Office Sought: ☐ House ☒ Senate ☐ President	Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: KS District:	Transaction ID: 8000330S000005L23		
SUBTOTAL of Disbursements This Page (optional)		2000.00	
TOTAL This Period (last page this line number only)			

SCHEDULE B (FEC Form 3X)
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Use separate schedule(s)
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NAME OF COMMITTEE (in full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

A. BLUEGRASS COMMITTEE Mailing Address P.O. BOX 3932 City LOUISVILLE State KY Zip Code 40201 Purpose of Disbursement 2001 GENERAL ELECTION Candidate Name Office Sought: House Senate President State: District: Disbursement For: 2001 Primary X General Other (specify) ▼ 24K Category/ Type			Date of Disbursement 10 / 30 / 2001 Amount of Each Disbursement this Period 1500.00 Transaction ID: 8000294S000008L23
B. FLETCHER FOR CONGRESS Mailing Address 880 CORPORATE DRIVE SUITE 301 City LEXINGTON State KY Zip Code 40503 Purpose of Disbursement 2002 PRIMARY ELECTION Candidate Name ERNIE FLETCHER Office Sought: X House Senate President State: KY District: 06 Disbursement For: 2002 X Primary General Other (specify) ▼ 24K Category/ Type			Date of Disbursement 10 / 15 / 2001 Amount of Each Disbursement this Period 1000.00 Transaction ID: 8000280S000001L23
C. LUCAS FOR CONGRESS 2002 Mailing Address 499 S. CAPITOL STREET, SW SUITE 603 City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement 2002 PRIMARY ELECTION Candidate Name KEN LUCAS Office Sought: X House Senate President State: KY District: 04 Disbursement For: 2002 X Primary General Other (specify) ▼ 24K Category/ Type			Date of Disbursement 12 / 14 / 2001 Amount of Each Disbursement this Period 1000.00 Transaction ID: 8000343S000008L23
SUBTOTAL of Disbursements This Page (optional) ▶			3500.00
TOTAL This Period (last page this line number only) ▶			

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

Full Name (Last, First, Middle Initial) A. NORTHUP FOR CONGRESS			Date of Disbursement 12 / 14 / 2001	
Mailing Address P.O. BOX 7313 City: LOUISVILLE State: KY Zip Code: 40257			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name ANNE NORTHUP				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: KY District: 03		Transaction ID: B000343S000010L23		
Full Name (Last, First, Middle Initial) B. WHITFIELD FOR CONGRESS COMMITTEE			Date of Disbursement 12 / 19 / 2001	
Mailing Address ATTN: E.O. WHIFIELD, TREASURER P.O. BOX 391 City: HOPKINSVILLE State: KY Zip Code: 42241			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name EDWARD WHITFIELD				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: KY District: 01		Transaction ID: B000344S0000003L23		
Full Name (Last, First, Middle Initial) C. BLUE DOG PAC			Date of Disbursement 11 / 19 / 2001	
Mailing Address 227 MASSACHUSETTS AVE., NE SUITE 101 City: WASHINGTON State: DC Zip Code: 20002			Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: House Senate President		Disbursement For: 2001 Primary ☒ General Other (specify) ▼		
State: District:		Transaction ID: B000313S0000005L23		

SUBTOTAL of Disbursements This Page (optional) **2500.00**

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

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

Full Name (Last, First, Middle Initial) A. GUMBO PAC			Date of Disbursement 10 / 30 / 2001	
Mailing Address 818 CONNECTICUT AVENUE, NW SUITE 1700 City State Zip Code WASHINGTON DC 20008			Amount of Each Disbursement this Period 1250.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼		Transaction ID: B000294S000004L23	
State: District:				
Full Name (Last, First, Middle Initial) B. THE BILLY TAUZIN COMMITTEE			Date of Disbursement 10 / 15 / 2001	
Mailing Address 2018 MT. VERNON AVENUE 3RD FLOOR City State Zip Code ALEXANDRIA VA 22301			Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name BILLY TAUZIN				
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		Transaction ID: B000290S000006L23	
State: LA District: 03				
Full Name (Last, First, Middle Initial) C. THE BILLY TAUZIN COMMITTEE			Date of Disbursement 10 / 30 / 2001	
Mailing Address 2018 MT. VERNON AVENUE 3RD FLOOR City State Zip Code ALEXANDRIA VA 22301			Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name BILLY TAUZIN				
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		Transaction ID: B000294S000007L23	
State: LA District: 03				
SUBTOTAL of Disbursements This Page (optional) ▶			4250.00	
TOTAL This Period (last page this line number only) ▶				

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NAME OF COMMITTEE (in full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. COLLINS FOR SENATOR

Mailing Address

P.O. BOX 1096

City

BANGOR

State

ME

Zip Code

04402

Purpose of Disbursement

2002 GENERAL ELECTION

Candidate Name

SUSAN COLLINS

24K

Category/
Type

Office Sought:

House

☒ Senate

President

Disbursement For:

2002

Primary

☒ General

Other (specify) ▼

State: ME

District:

Date of Disbursement

12 / 05 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000330S000007L23

Full Name (Last, First, Middle Initial)

B. COLLINS FOR SENATOR

Mailing Address

P.O. BOX 1096

City

BANGOR

State

ME

Zip Code

04402

Purpose of Disbursement

2002 GENERAL ELECTION

Candidate Name

SUSAN COLLINS

24K

Category/
Type

Office Sought:

House

☒ Senate

President

Disbursement For:

2002

Primary

☒ General

Other (specify) ▼

State: ME

District:

Date of Disbursement

12 / 05 / 2001

Amount of Each Disbursement this Period

625.00

Transaction ID: B000330S0000011L23

Full Name (Last, First, Middle Initial)

C. COLLINS FOR SENATOR

Mailing Address

P.O. BOX 1096

City

BANGOR

State

ME

Zip Code

04402

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

SUSAN COLLINS

24K

Category/
Type

Office Sought:

House

☒ Senate

President

Disbursement For:

2002

☒ Primary

General

Other (specify) ▼

State: ME

District:

Date of Disbursement

12 / 05 / 2001

Amount of Each Disbursement this Period

500.00

Transaction ID: B000330S000008L23

SUBTOTAL of Disbursements This Page (optional) ▶

2125.00

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

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

Full Name (Last, First, Middle Initial) A. NORM COLEMAN FOR U.S. SENATE			Date of Disbursement 10 / 24 / 2001	
Mailing Address 1410 ENERGY PARK DRIVE SUITE 11 City State Zip Code ST. PAUL MN 55108			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	Transaction ID: B000288S000006L23	
Candidate Name NORMAN COLEMAN				
Office Sought: House X Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼			
State: MN District:				
Full Name (Last, First, Middle Initial) B. NORM COLEMAN FOR U.S. SENATE			Date of Disbursement 11 / 19 / 2001	
Mailing Address 1410 ENERGY PARK DRIVE SUITE 11 City State Zip Code ST. PAUL MN 55108			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	Transaction ID: B000313S000001L23	
Candidate Name NORMAN COLEMAN				
Office Sought: House X Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼			
State: MN District:				
Full Name (Last, First, Middle Initial) C. MISSOURIANS FOR KIT BOND			Date of Disbursement 12 / 05 / 2001	
Mailing Address 507 CAPITOL COURT, NE SUITE 100 City State Zip Code WASHINGTON DC 20002			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2004 PRIMARY ELECTION		24K Category/ Type	Transaction ID: B000330S000004L23	
Candidate Name CHRISTOPHER 'KIT' BOND				
Office Sought: House X Senate President	Disbursement For: 2004 X Primary General Other (specify) ▼			
State: MO District:				
SUBTOTAL of Disbursements This Page (optional) ▶			3000.00	
TOTAL This Period (last page this line number only) ▶				

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

Full Name (Last, First, Middle Initial) A. JEAN CARNAHAN FOR MISSOURI COMMITTEE		Date of Disbursement 11 / 19 / 2001	
Mailing Address P.O. BOX 23398 City ST. LOUIS State MO Zip Code 63156		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name JEAN CARNAHAN			
Office Sought: House X Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		
State: MO District:	Transaction ID: B000313S000007L23		
Full Name (Last, First, Middle Initial) B. CLAY, JR. FOR CONGRESS COMMITTEE		Date of Disbursement 12 / 19 / 2001	
Mailing Address P.O. BOX 4544 City ST. LOUIS State MO Zip Code 63108		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name WILLIAM 'BILL' CLAY, JR.			
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		
State: MO District: 01	Transaction ID: B000344S000004L23		
Full Name (Last, First, Middle Initial) C. TEAM EMERSON		Date of Disbursement 11 / 27 / 2001	
Mailing Address 400 BROADWAY SUITE 326 City CAPE GIRARDEAU State MO Zip Code 63701		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name JOANN EMERSON			
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		
State: MO District: 08	Transaction ID: B000325S000002L23		

SUBTOTAL of Disbursements This Page (optional) **2500.00**

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

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. GRAVES FOR CONGRESS

Mailing Address

6500 TOWER DRIVE

City

KANSAS CITY

State

MO

Zip Code

64151

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

SAM GRAVES

24K

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For: 2002
☒ Primary General
Other (specify) ▼

State: MO District: 06

Date of Disbursement

12 / 14 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000343S000011L23

Full Name (Last, First, Middle Initial)

B. BURR FOR CONGRESS COMMITTEE

Mailing Address

P.O. BOX 5732

City

WINSTON-SALEM

State

NC

Zip Code

27113

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

RICHARD BURR

24K

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For: 2002
☒ Primary General
Other (specify) ▼

State: NC District: 05

Date of Disbursement

10 / 15 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000280S000004L23

Full Name (Last, First, Middle Initial)

C. EARL POMEROY FOR CONGRESS

Mailing Address

80 F STREET, N.W.

SUITE 804

City

WASHINGTON

State

DC

Zip Code

20001

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

EARL POMEROY

24K

Category/
Type

Office Sought: ☒ House
Senate
President

Disbursement For: 2002
☒ Primary General
Other (specify) ▼

State: ND District:

Date of Disbursement

10 / 30 / 2001

Amount of Each Disbursement this Period

1500.00

Transaction ID: B000294S000005L23

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

Full Name (Last, First, Middle Initial) A. SANDHILLS PAC			Date of Disbursement 11 / 19 / 2001	
Mailing Address 818 CONNECTICUT AVENUE, NW SUITE 1008 City State Zip Code WASHINGTON DC 20008			Amount of Each Disbursement this Period 2500.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼		Transaction ID: B000313S000006L23	
State: District:				
Full Name (Last, First, Middle Initial) B. LEE TERRY FOR CONGRESS			Date of Disbursement 10 / 24 / 2001	
Mailing Address 1107 SOUTH 198TH STREET City State Zip Code OMAHA NE 68144			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name LEE TERRY				
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		Transaction ID: B000286S000007L23	
State: NE District: 02				
Full Name (Last, First, Middle Initial) C. SUNUNU FOR CONGRESS			Date of Disbursement 10 / 15 / 2001	
Mailing Address P.O. BOX 500 City State Zip Code RYE NH 03870			Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name JOHN E. SUNUNU				
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		Transaction ID: B000280S000002L23	
State: NH District: 01				
SUBTOTAL of Disbursements This Page (optional)			4000.00	
TOTAL This Period (last page this line number only)				

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (in full)
 BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial) A. SUNUNU FOR CONGRESS		Date of Disbursement 10 / 15 / 2001	
Mailing Address P.O. BOX 500 City RYE State NH Zip Code 03870		Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement 2002 GENERAL ELECTION		24K Category/ Type	
Candidate Name JOHN E. SUNUNU			
Office Sought: ☒ House ☐ Senate ☐ President	Disbursement For: 2002 ☐ Primary ☒ General Other (specify) ▼		
State: NH District: 01	Transaction ID: 8000280S000003L23		
Full Name (Last, First, Middle Initial) B. ANDREWS FOR CONGRESS		Date of Disbursement 11 / 19 / 2001	
Mailing Address P.O. BOX 295 City OAKLYN State NJ Zip Code 08107		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name ROBERT ERNEST ANDREWS			
Office Sought: ☒ House ☐ Senate ☐ President	Disbursement For: 2002 ☒ Primary ☐ General Other (specify) ▼		
State: NJ District: 01	Transaction ID: 8000313S000008L23		
Full Name (Last, First, Middle Initial) C. LOBIONDO FOR CONGRESS		Date of Disbursement 10 / 15 / 2001	
Mailing Address P.O. BOX 550 City VINELAND State NJ Zip Code 08362		Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION		24K Category/ Type	
Candidate Name FRANK LOBIONDO			
Office Sought: ☒ House ☐ Senate ☐ President	Disbursement For: 2002 ☒ Primary ☐ General Other (specify) ▼		
State: NJ District: 02	Transaction ID: 8000280S000007L23		

SUBTOTAL of Disbursements This Page (optional) **2500.00**

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

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

Full Name (Last, First, Middle Initial) A. HEATHER WILSON FOR CONGRESS			Date of Disbursement 11 / 19 / 2001	
Mailing Address 1420 CARLISLE, NE SUITE 108 City State Zip Code ALBUQUERQUE NM 87110			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name HEATHER WILSON				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: NM District: 01		Transaction ID: B000313S000003L23		
Full Name (Last, First, Middle Initial) B. LEADERSHIP PAC 2002			Date of Disbursement 11 / 19 / 2001	
Mailing Address 1199 N. FAIRFAX STREET SUITE 425 City State Zip Code ALEXANDRIA VA 22314			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: ☐ House ☐ Senate ☐ President		Disbursement For: 2001 Primary ☒ General Other (specify) ▼		
State: District:		Transaction ID: B000313S000003L23		
Full Name (Last, First, Middle Initial) C. PRYCE FOR CONGRESS			Date of Disbursement 12 / 14 / 2001	
Mailing Address 145 EAST RICH STREET City State Zip Code COLUMBUS OH 43215			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name DEBORAH PRYCE				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: OH District: 15		Transaction ID: B000343S000001L23		

SUBTOTAL of Disbursements This Page (optional) **3000.00**

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

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

A. JOHN SULLIVAN FOR CONGRESS Mailing Address 5200 S. HARVARD AVENUE City State Zip Code TULSA OK 74135 Purpose of Disbursement 2002 PRIMARY ELECTION Candidate Name JOHN SULLIVAN Office Sought: ☒ House ☐ Senate ☐ President Disbursement For: 2002 ☒ Primary ☐ General Other (specify) ▼ State: OK District: 01		Date of Disbursement 12 / 19 / 2001 Amount of Each Disbursement this Period 1000.00 Transaction ID: B000344S000001L23
B. GORDON SMITH FOR U.S. SENATE Mailing Address 1615 L STREET, NW SUITE 1215 City State Zip Code WASHINGTON DC 20036 Purpose of Disbursement 2002 GENERAL ELECTION Candidate Name GORDON SMITH Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2002 ☐ Primary ☒ General Other (specify) ▼ State: OR District:		Date of Disbursement 12 / 14 / 2001 Amount of Each Disbursement this Period 918.90 Transaction ID: B000343S000007L23
C. GORDON SMITH FOR U.S. SENATE Mailing Address 1615 L STREET, NW SUITE 1215 City State Zip Code WASHINGTON DC 20036 Purpose of Disbursement 2002 PRIMARY ELECTION Candidate Name GORDON SMITH Office Sought: ☐ House ☒ Senate ☐ President Disbursement For: 2002 ☒ Primary ☐ General Other (specify) ▼ State: OR District:		Date of Disbursement 12 / 14 / 2001 Amount of Each Disbursement this Period 500.00 Transaction ID: B000343S000008L23
SUBTOTAL of Disbursements This Page (optional) ▶		2418.90
TOTAL This Period (last page this line number only) ▶		

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

Full Name (Last, First, Middle Initial) A. AMERICA'S FOUNDATION			Date of Disbursement 11 / 02 / 2001	
Mailing Address 128 N. COLUMBUS STREET City: ALEXANDRIA State: VA Zip Code: 22314			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼		Transaction ID: B000295S000002L23	
State: District:				
Full Name (Last, First, Middle Initial) B. DOYLE FOR CONGRESS			Date of Disbursement 11 / 19 / 2001	
Mailing Address P.O. BOX 17428 City: PITTSBURCH State: PA Zip Code: 15236			Amount of Each Disbursement this Period 500.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name MICHAEL F. DOYLE				
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		Transaction ID: B000313S000004L23	
State: PA District: 18				
Full Name (Last, First, Middle Initial) C. JIM CLYBURN CAMPAIGN COMMITTEE			Date of Disbursement 10 / 15 / 2001	
Mailing Address 501 JUNIPER STREET City: COLUMBIA State: SC Zip Code: 29203			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name JIM CLYBURN				
Office Sought: X House Senate President	Disbursement For: 2002 X Primary General Other (specify) ▼		Transaction ID: B000280S000011L23	
State: SC District: 08				

SUBTOTAL of Disbursements This Page (optional) **2500.00**

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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

Full Name (Last, First, Middle Initial) A. SPRATT FOR CONGRESS COMMITTEE			Date of Disbursement 10 / 15 / 2001	
Mailing Address P.O. BOX 10986 City State Zip Code ROCK HILL SC 29731			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name JOHN SPRATT				
Office Sought: ☒ House ☐ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: SC District: 05		Transaction ID: B000280S000009L23		
Full Name (Last, First, Middle Initial) B. LEADERSHIP 21			Date of Disbursement 10 / 30 / 2001	
Mailing Address 818 CONNECTICUT AVENUE, NW SUITE 1007 City State Zip Code WASHINGTON DC 20008			Amount of Each Disbursement this Period 1250.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: ☐ House ☐ Senate ☐ President		Disbursement For: 2001 ☐ Primary ☒ General Other (specify) ▼		
State: District:		Transaction ID: B000294S0000003L23		
Full Name (Last, First, Middle Initial) C. TENNESSEANS FOR SENATOR THOMPSON			Date of Disbursement 11 / 27 / 2001	
Mailing Address P.O. BOX 1869 City State Zip Code BRENTWOOD TN 37024			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2002 PRIMARY ELECTION			24K Category/ Type	
Candidate Name FRED THOMPSON				
Office Sought: ☐ House ☒ Senate ☐ President		Disbursement For: 2002 ☒ Primary General Other (specify) ▼		
State: TN District:		Transaction ID: B000325S000001L23		

SUBTOTAL of Disbursements This Page (optional) **3250.00**

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

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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

Full Name (Last, First, Middle Initial) A. VOLUNTEER PAC			Date of Disbursement 10 / 24 / 2001	
Mailing Address 2000 GLEN ECHO RD. SUITE 107 City State Zip Code NASHVILLE TN 37215			Amount of Each Disbursement this Period 2000.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼			
State: District:			Transaction ID: B000288S000002L23	
Full Name (Last, First, Middle Initial) B. VOLUNTEER PAC			Date of Disbursement 12 / 14 / 2001	
Mailing Address 2000 GLEN ECHO RD. SUITE 107 City State Zip Code NASHVILLE TN 37215			Amount of Each Disbursement this Period 1000.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼			
State: District:			Transaction ID: B000343S000002L23	
Full Name (Last, First, Middle Initial) C. AMERICANS FOR A REPUBLICAN MAJORITY			Date of Disbursement 10 / 30 / 2001	
Mailing Address P.O. BOX 5804 City State Zip Code ARLINGTON VA 22205			Amount of Each Disbursement this Period 1500.00	
Purpose of Disbursement 2001 GENERAL ELECTION			24K Category/ Type	
Candidate Name				
Office Sought: House Senate President	Disbursement For: 2001 Primary X General Other (specify) ▼			
State: District:			Transaction ID: B000294S000008L23	
SUBTOTAL of Disbursements This Page (optional) ▶			4500.00	
TOTAL This Period (last page this line number only) ▶				

SCHEDULE B (FEC Form 3X)
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NAME OF COMMITTEE (in full)
 BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)
 A. JOHN CORNYN FOR SENATE, INC.

Mailing Address
 P.O. BOX 13026

City State Zip Code
 AUSTIN TX 78711

Purpose of Disbursement
 2002 PRIMARY ELECTION

Candidate Name
 JOHN CORNYN

24K
 Category/
 Type

Office Sought: House
 X Senate
 President
 Disbursement For: 2002
 X Primary General
 Other (specify) ▼

State: TX District:

Date of Disbursement

10 / 30 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000294S000001L23

Full Name (Last, First, Middle Initial)
 B. MAX SANDLIN FOR CONGRESS

Mailing Address
 227 MASSACHUSETTS AVE., NE SUITE 101

City State Zip Code
 WASHINGTON DC 20002

Purpose of Disbursement
 2002 PRIMARY ELECTION

Candidate Name
 MAX SANDLIN

24K
 Category/
 Type

Office Sought: X House
 Senate
 President
 Disbursement For: 2002
 X Primary General
 Other (specify) ▼

State: TX District: 01

Date of Disbursement

10 / 24 / 2001

Amount of Each Disbursement this Period

500.00

Transaction ID: B000298S000004L23

Full Name (Last, First, Middle Initial)
 C. STENHOLM FOR CONGRESS

Mailing Address
 227 MASSACHUSETTS AVE., NE SUITE 101

City State Zip Code
 WASHINGTON DC 20002

Purpose of Disbursement
 2002 PRIMARY ELECTION

Candidate Name
 CHARLES W. STENHOLM

24K
 Category/
 Type

Office Sought: X House
 Senate
 President
 Disbursement For: 2002
 X Primary General
 Other (specify) ▼

State: TX District: 17

Date of Disbursement

11 / 27 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000325S000003L23

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)

BLUEPAC - BLUE CROSS/BLUE SHIELD PAC

Full Name (Last, First, Middle Initial)

A. SENATOR JOHN WARNER COMMITTEE

Mailing Address

P.O. BOX 3536

City

MERRIFIELD

State

VA

Zip Code

22116

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

JOHN WARNER

24K

Category/
Type

Office Sought:

House

☒ Senate

President

Disbursement For:

2002

☒ Primary

General

Other (specify) ▼

State: VA

District:

Date of Disbursement

10 / 30 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000294S000002L23

Full Name (Last, First, Middle Initial)

B. RYAN FOR CONGRESS

Mailing Address

1205 PRINCE STREET

City

ALEXANDRIA

State

VA

Zip Code

22314

Purpose of Disbursement

2002 PRIMARY ELECTION

Candidate Name

PAUL RYAN

24K

Category/
Type

Office Sought:

☒ House

Senate

President

Disbursement For:

2002

☒ Primary

General

Other (specify) ▼

State: VA

District: 01

Date of Disbursement

12 / 19 / 2001

Amount of Each Disbursement this Period

1000.00

Transaction ID: B000344S000002L23

C.

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

74918.90