

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Bluepac - Blue Cross Blue Shield Association 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 ▲
C C00194746 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 08 / 01 / 2020 through 08 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Didawick, Kathy, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Didawick, Kathy, , ,* [Electronically Filed] Date 09 / 14 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Bluepac - Blue Cross Blue Shield Association Pac

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		198710.10
(b) Cash on Hand at Beginning of Reporting Period.....	188502.41	
(c) Total Receipts (from Line 19)	78728.17	341220.48
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	267230.58	539930.58
7. Total Disbursements (from Line 31).....	28250.00	300950.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	238980.58	238980.58
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Bluepac - Blue Cross Blue Shield Association Pac

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	48513.10	111461.96
(ii) Unitemized	1031.07	31470.52
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	49544.17	142932.48
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	49544.17	147932.48
12. Transfers From Affiliated/Other Party Committees.....	28184.00	192288.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	78728.17	341220.48
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	78728.17	341220.48

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28250.00	300950.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	28250.00	300950.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	28250.00	300950.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	49544.17	147932.48
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	49544.17	147932.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Anderson, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 W Genesee St
 City Buffalo State NY Zip Code 14202-2657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthNow New York Inc. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt 08 / 03 / 2020
Transaction ID : B6BC28289B264290A1D0
 Amount of Each Receipt this Period 115.50
 Memo Item

B. Anderson, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 W Genesee St
 City Buffalo State NY Zip Code 14202-2657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthNow New York Inc. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt 08 / 06 / 2020
Transaction ID : A73751CFB2F9464CB1AE
 Amount of Each Receipt this Period 77.00
 Memo Item

C. Anderson, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 257 W Genesee St
 City Buffalo State NY Zip Code 14202-2657
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HealthNow New York Inc. Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 693.00

Date of Receipt 08 / 06 / 2020
Transaction ID : C88B899380644530B97C
 Amount of Each Receipt this Period 77.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	269.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-56
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-55
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-36
 Amount of Each Receipt this Period 15.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-35
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-28
 Amount of Each Receipt this Period 35.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-27
 Amount of Each Receipt this Period 35.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Bergeman, Christine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 89 Hidden Spring Cir
 City Rochester State NY Zip Code 14616-1922
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus, Inc. Occupation (for Individual) Corporate VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 0E56FCB7E6144E5BA530
 Amount of Each Receipt this Period 1500.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-68
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-67
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 07 / 2020
Transaction ID : 2020091116254-5
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020091116254-14
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-89
 Amount of Each Receipt this Period 30.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-87
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Booth, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10 Northstone Rise
 City Pittsford State NY Zip Code 14534-3064
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus BlueCross BlueShield Occupation (for Individual) EVP & CAO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3500.00

Date of Receipt 08 / 03 / 2020
Transaction ID : D790FDF4A74640B6AA27
 Amount of Each Receipt this Period 3500.00
 Memo Item

C. Breskin, William, Adam, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1703 Hunts End Ct
 City Vienna State VA Zip Code 22182-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) SVP Government Programs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1870.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-118
 Amount of Each Receipt this Period 110.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3640.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Breskin, William, Adam, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1703 Hunts End Ct
 City Vienna State VA Zip Code 22182-1833
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) SVP Government Programs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1870.00

Date of Receipt **08 / 20 / 2020**
Transaction ID : 2020081816135-115
 Amount of Each Receipt this Period 110.00
 Memo Item

B. Browdy, Ed, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Corriedale PI
 City Lovettsville State VA Zip Code 20180-8566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr Syst Proj Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **08 / 06 / 2020**
Transaction ID : 202008059415-104
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Browdy, Ed, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 19 Corriedale PI
 City Lovettsville State VA Zip Code 20180-8566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr Syst Proj Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt **08 / 20 / 2020**
Transaction ID : 2020081816135-101
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-93
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-91
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Burleson, Gene, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 320 Argonne Dr NW
 City Atlanta State GA Zip Code 30305-2814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Health Now Occupation (for Individual) Member, Board of Directors
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 33218F84C8554411A738
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	540.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt
 08 / 06 / 2020
Transaction ID : 202008059415-103
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt
 08 / 20 / 2020
Transaction ID : 2020081816135-100
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt
 08 / 06 / 2020
Transaction ID : 202008059415-59
 Amount of Each Receipt this Period 75.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-58
 Amount of Each Receipt this Period 75.00
 Memo Item

B. Carson, Dwayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-3
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Carson, Dwayne, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-3
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Cerisano, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5552 Sequoia Farms Dr
 City Centreville State VA Zip Code 20120-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1785.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-107
 Amount of Each Receipt this Period 105.00
 Memo Item

B. Cerisano, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5552 Sequoia Farms Dr
 City Centreville State VA Zip Code 20120-3302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1785.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-104
 Amount of Each Receipt this Period 105.00
 Memo Item

C. Choudhri, Anshuman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 Clarendon Blvd
 City Arlington State VA Zip Code 22201-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Value Based Policy
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-98
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	245.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Choudhri, Anshuman, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2250 Clarendon Blvd
 City Arlington State VA Zip Code 22201-3332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Value Based Policy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 595.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-95
 Amount of Each Receipt this Period 35.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-71
 Amount of Each Receipt this Period 75.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-70
 Amount of Each Receipt this Period 75.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶ 185.00
TOTAL This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-20
 Amount of Each Receipt this Period 60.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-19
 Amount of Each Receipt this Period 60.00
 Memo Item

C. Cynthia, Langston, M, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2948 NSouthern Hills Drive
 City Wadsworth State IL Zip Code 60083
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus, Inc. Occupation (for Individual) Senior VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 958ABD754A27420C967C
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1620.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Davis, Mitchell, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 W Church St
 City Edenton State NC Zip Code 27932-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Mgr External Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-96
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Davis, Mitchell, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 203 W Church St
 City Edenton State NC Zip Code 27932-1811
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Mgr External Audit
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-93
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-74
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	60.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 20 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-73
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-109
 Amount of Each Receipt this Period 95.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-106
 Amount of Each Receipt this Period 95.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Date of Receipt **08 / 06 / 2020**
Transaction ID : 202008059415-108
 Amount of Each Receipt this Period 58.00
 Memo Item

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

Date of Receipt **08 / 20 / 2020**
Transaction ID : 2020081816135-105
 Amount of Each Receipt this Period 58.00
 Memo Item

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

Date of Receipt **08 / 07 / 2020**
Transaction ID : 202008101395-4
 Amount of Each Receipt this Period 20.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Date of Receipt 08 / 21 / 2020
Transaction ID : 2020081922534-4
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Edbauer, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 Delaware Ave Unit 1609
 City Buffalo State NY Zip Code 14202-2112
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Western New York Occupation (for Individual) Senior Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 410E590252AF46E5BB45
 Amount of Each Receipt this Period 400.00
 Memo Item

C. Eiting, Paul, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 S Payne St
 City Alexandria State VA Zip Code 22314-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Legislative and Regulatory Policy Dir
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-112
 Amount of Each Receipt this Period 30.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 OF 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Eiting, Paul, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 710 S Payne St
 City Alexandria State VA Zip Code 22314-3930
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Legislative and Regulatory Policy Dir
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-109
 Amount of Each Receipt this Period 30.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-23
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-22
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Flamm, Carole, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7014 Cottontail Ct
 City Springfield State VA Zip Code 22153-1305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Medical Director Clinical Content
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-100
 Amount of Each Receipt this Period 15.00
 Memo Item

B. Flamm, Carole, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7014 Cottontail Ct
 City Springfield State VA Zip Code 22153-1305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Medical Director Clinical Content
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-97
 Amount of Each Receipt this Period 15.00
 Memo Item

C. Gaige, Marianne, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 304
 City Holland Patent State NY Zip Code 13354-0304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus BlueCross BlueShield Occupation (for Individual) Board Member, Vice Chairman
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 54F1D495709C4490835C
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1030.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Gardner, Melissa, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 Edenfield Rd

City Penfield	State NY	Zip Code 14526-1975
------------------	-------------	------------------------

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

Name of Employer (for Individual) Excellus BCBS	Occupation (for Individual) Sr. VP
--	---------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

Transaction ID : 0807D880138B42D0B5E0

Amount of Each Receipt this Period
1500.00

Memo Item

B. Gerrard, Paul, John Julian, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
986.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2020

Transaction ID : 202008059415-60

Amount of Each Receipt this Period
58.00

Memo Item

C. Gerrard, Paul, John Julian, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
986.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : 2020081816135-59

Amount of Each Receipt this Period
58.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1616.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Goodrich, William, H., ,		Date of Receipt MM / DD / YYYY 08 / 03 / 2020 Transaction ID : 20ABBC52CAD4E3DA49
Mailing Address 20 Beauclaire Ln		Amount of Each Receipt this Period 1000.00
City Fairport	State NY	Zip Code 14450-4618
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Excellus	Occupation (for Individual) Board of Directors	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Gorecki, Chris, , ,		Date of Receipt MM / DD / YYYY 08 / 03 / 2020 Transaction ID : 94822E39378E4F30A939
Mailing Address 4 Mayers Gdn		Amount of Each Receipt this Period 2500.00
City Webster	State NY	Zip Code 14580-4616
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Excellus	Occupation (for Individual) Sr. VP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Hafoka, Ruth G, , ,		Date of Receipt MM / DD / YYYY 08 / 07 / 2020 Transaction ID : 2020091116254-7
Mailing Address 1310 G St NW		Amount of Each Receipt this Period 80.00
City Washington	State DC	Zip Code 20005-3000
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot	Occupation (for Individual) VP Sr Chief Human Resources Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1360.00	

SUBTOTAL of Receipts This Page (optional).....	3580.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Hafoka, Ruth G, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesota Occupation (for Individual) VP Sr Chief Human Resources Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020091116254-16
 Amount of Each Receipt this Period 80.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-92
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-90
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-8
 Amount of Each Receipt this Period 58.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-8
 Amount of Each Receipt this Period 58.00
 Memo Item

C. Handelman, Justine, Germann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9915 Hillridge Dr
 City Kensington State MD Zip Code 20895-3230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr VP Policy & Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3264.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-87
 Amount of Each Receipt this Period 192.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	308.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Handelman, Justine, Germann, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9915 Hillridge Dr
 City Kensington State MD Zip Code 20895-3230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Sr VP Policy & Rep
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3264.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-85
 Amount of Each Receipt this Period 192.00
 Memo Item

B. Hays, Philip, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4037 35th St N
 City Arlington State VA Zip Code 22207-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Congressional Relation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-113
 Amount of Each Receipt this Period 95.00
 Memo Item

C. Hays, Philip, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4037 35th St N
 City Arlington State VA Zip Code 22207-4427
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Congressional Relation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1615.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-110
 Amount of Each Receipt this Period 95.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	382.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Hedges, Kari, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

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

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) SVP Comm Mkts Data Strat
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 06 / 2020

Transaction ID : 202008059415-41

Amount of Each Receipt this Period
75.00

Memo Item

B. Hedges, Kari, J, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

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

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) SVP Comm Mkts Data Strat
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1275.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 20 / 2020

Transaction ID : 2020081816135-40

Amount of Each Receipt this Period
75.00

Memo Item

C. Hook, Thomas, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2917 Belclaire Dr

City Frisco	State TX	Zip Code 75034-5969
----------------	-------------	------------------------

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

Name of Employer (for Individual) Health Now	Occupation (for Individual) Chair, Board of Directors
---	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 / 03 / 2020

Transaction ID : D90C36C9F5B44969BF31

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-42
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-41
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Howard, Karen, L, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 194 Roycroft Blvd
 City Snyder State NY Zip Code 14226-4558
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS Western New York Occupation (for Individual) Board Member
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 03 / 2020
Transaction ID : BE33DA9E51D44EFABBAF
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Iadicicco, Robert, George, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6002 Madison

City Overlook Ct	State VA	Zip Code 22041
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Associate Counsel II
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2020

Transaction ID : 202008059415-116

Amount of Each Receipt this Period
35.00

Memo Item

B. Iadicicco, Robert, George, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6002 Madison

City Overlook Ct	State VA	Zip Code 22041
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Associate Counsel II
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : 2020081816135-113

Amount of Each Receipt this Period
35.00

Memo Item

C. Jackson, Veronica, Esther, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1310 G St NW

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

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) MD Planning & Outreach
---	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
510.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2020

Transaction ID : 202008059415-11

Amount of Each Receipt this Period
30.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Jackson, Veronica, Esther, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Planning & Outreach
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt **08 / 20 / 2020**
Transaction ID : 2020081816135-10
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Jones, Bruce, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 Stover Rd
 City Rochester State NY Zip Code 14624-4446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus Occupation (for Individual) CIO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt **08 / 03 / 2020**
Transaction ID : B1A7037946F94BF58EC0
 Amount of Each Receipt this Period 1500.00
 Memo Item

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

Date of Receipt **08 / 06 / 2020**
Transaction ID : 202008059415-43
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1550.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Jones, Keir, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

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

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) Dir Financial Ops
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : 2020081816135-42

Amount of Each Receipt this Period
20.00

Memo Item

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

Mailing Address 225 N Michigan Ave

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1105.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2020

Transaction ID : 202008059415-37

Amount of Each Receipt this Period
65.00

Memo Item

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

Mailing Address 225 N Michigan Ave

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1105.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : 2020081816135-36

Amount of Each Receipt this Period
65.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

A. Kahler, Camille, T, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 200 W Garden St
 City Rome State NY Zip Code 13440-3426
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus, Inc. Occupation (for Individual) Attorney and Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 03 / 2020**
Transaction ID : 82637BD927EA4826B74F
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

Date of Receipt **08 / 06 / 2020**
Transaction ID : 202008059415-97
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt **08 / 20 / 2020**
Transaction ID : 2020081816135-94
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 07 / 2020
Transaction ID : 202008101395-6
 Amount of Each Receipt this Period 90.00
 Memo Item

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

Date of Receipt 08 / 21 / 2020
Transaction ID : 2020081922534-6
 Amount of Each Receipt this Period 90.00
 Memo Item

C. Keefer, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Public Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 07 / 2020
Transaction ID : 2020091116254-6
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	205.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

A. Keefer, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020091116254-15
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Kessler, Dennis, P., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 35 East Blvd
 City Rochester State NY Zip Code 14610-1520
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus Occupation (for Individual) Board of Directors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 46FFC356F6D84A45B58B
 Amount of Each Receipt this Period 1000.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-27
 Amount of Each Receipt this Period 20.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1045.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-26
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-40
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-39
 Amount of Each Receipt this Period 50.00
 Memo Item

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) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 39 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt
 08 / 06 / 2020
Transaction ID : 202008059415-65
 Amount of Each Receipt this Period 110.00
 Memo Item

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

Date of Receipt
 08 / 20 / 2020
Transaction ID : 2020081816135-64
 Amount of Each Receipt this Period 110.00
 Memo Item

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

Date of Receipt
 08 / 06 / 2020
Transaction ID : 202008059415-38
 Amount of Each Receipt this Period 50.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-37
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-17
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-16
 Amount of Each Receipt this Period 15.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-29
 Amount of Each Receipt this Period 30.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-28
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Leahey Jr, Robert, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 County Road H Unit A21
 City Genoa City State WI Zip Code 53128-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Lic and Comp LFS
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-120
 Amount of Each Receipt this Period 20.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Leahy Jr, Robert, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1201 County Road H
 Unit A21
 City Genoa City State WI Zip Code 53128-2615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Lic and Comp LFS
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-117
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt 08 / 07 / 2020
Transaction ID : 202008101395-7
 Amount of Each Receipt this Period 30.00
 Memo Item

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

Date of Receipt 08 / 21 / 2020
Transaction ID : 2020081922534-7
 Amount of Each Receipt this Period 30.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 43 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-15
 Amount of Each Receipt this Period 60.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-14
 Amount of Each Receipt this Period 60.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-57
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 44 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-56
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Lynch, Scott B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Chief Legal Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 07 / 2020
Transaction ID : 2020091116254-4
 Amount of Each Receipt this Period 20.00
 Memo Item

C. Lynch, Scott B., , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3535 Blue Cross Rd
 City Eagan State MN Zip Code 55122-1154
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Chief Legal Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020091116254-13
 Amount of Each Receipt this Period 20.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Manocchia, Augustine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Cassandra Ln
 City N Kingstown State RI Zip Code 02852-3410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhode Island Occupation (for Individual) Medical Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 07 / 2020
Transaction ID : 202008101395-8
 Amount of Each Receipt this Period 20.00
 Memo Item

B. Manocchia, Augustine, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12 Cassandra Ln
 City N Kingstown State RI Zip Code 02852-3410
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhode Island Occupation (for Individual) Medical Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 21 / 2020
Transaction ID : 2020081922534-8
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-13
 Amount of Each Receipt this Period 30.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	70.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 46 OF 88
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

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

Date of Receipt **08 / 20 / 2020**
Transaction ID : 2020081816135-12
 Amount of Each Receipt this Period 30.00
 Memo Item

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

Date of Receipt **08 / 06 / 2020**
Transaction ID : 202008059415-53
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt **08 / 20 / 2020**
Transaction ID : 2020081816135-52
 Amount of Each Receipt this Period 15.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	60.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-12
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-11
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-51
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-50
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Masood, Faheem, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 Latour Mnr
 City Fairport State NY Zip Code 14450-4637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus Occupation (for Individual) Board of Directors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 472790E5ECFF4123892F
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Matt, Carol, H., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7289 Norton Ave
 City Clinton State NY Zip Code 13323-3521
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Homemaker Occupation (for Individual) Homemaker
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 4D0121E1E23B4661A354
 Amount of Each Receipt this Period 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 2025.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

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

Date of Receipt 08 / 07 / 2020
Transaction ID : 2020091116254-8
 Amount of Each Receipt this Period 65.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020091116254-17
 Amount of Each Receipt this Period 65.00
 Memo Item

C. McClure, Clay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3509 7th St N
 City Arlington State VA Zip Code 22201-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD State Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 654.50

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-102
 Amount of Each Receipt this Period 38.50
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	168.50
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. McClure, Clay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3509 7th St N
 City Arlington State VA Zip Code 22201-2301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD State Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 654.50

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-99
 Amount of Each Receipt this Period 38.50
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-31
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-30
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	88.50
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-62
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-61
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-70
 Amount of Each Receipt this Period 55.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-69
 Amount of Each Receipt this Period 55.00
 Memo Item

B. Muse, Tyrone, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1212
 City Vestal State NY Zip Code 13851-1212
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus Occupation (for Individual) Board of Directors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 990068839E7D4D598B8F
 Amount of Each Receipt this Period 5000.00
 Memo Item

C. Nangreave, Richard, P, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 46 Nature Vw
 City Pittsford State NY Zip Code 14534-9637
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus, Inc. Occupation (for Individual) Corporate VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 8F0A3380B333463FA462
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6555.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Nasca, David, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 54 Lanoche Ct
 City Williamsville State NY Zip Code 14221-1977
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus Occupation (for Individual) Board of Directors
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **08 / 03 / 2020**
Transaction ID : F8D30B82B596478BA03C
 Amount of Each Receipt this Period 500.00
 Memo Item

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

Date of Receipt **08 / 06 / 2020**
Transaction ID : 202008059415-77
 Amount of Each Receipt this Period 95.00
 Memo Item

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

Date of Receipt **08 / 20 / 2020**
Transaction ID : 2020081816135-76
 Amount of Each Receipt this Period 95.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	690.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt **08 / 07 / 2020**
Transaction ID : 202008101395-9
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt **08 / 21 / 2020**
Transaction ID : 2020081922534-9
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt **08 / 06 / 2020**
Transaction ID : 202008059415-16
 Amount of Each Receipt this Period 20.00
 Memo Item

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-15
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-10
 Amount of Each Receipt this Period 105.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-9
 Amount of Each Receipt this Period 105.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 56 OF 88
(check only one)
 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 Association Pac

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-69
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-68
 Amount of Each Receipt this Period 15.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-66
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-65
 Amount of Each Receipt this Period 25.00
 Memo Item

B. Patzman, Andrew, David, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-2
 Amount of Each Receipt this Period 80.00
 Memo Item

C. Patzman, Andrew, David, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) MD Federal Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1360.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-2
 Amount of Each Receipt this Period 80.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	185.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-35
 Amount of Each Receipt this Period 35.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-34
 Amount of Each Receipt this Period 35.00
 Memo Item

C. Quinlivan, Timothy, J, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4062 Coventry Green Cir
 City Williamsville State NY Zip Code 14221-7233
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus, Inc. Occupation (for Individual) Corporate VP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 7A1E733CA3484A39AC28
 Amount of Each Receipt this Period 1500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1570.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3 Ramble Wood Dr

City Skaneateles	State NY	Zip Code 13152-1349
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Excellus BCBS	Occupation (for Individual) Senior Vice President Marketing & Sale
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

Transaction ID : 063863992C9043FC9681

Amount of Each Receipt this Period
2500.00

Memo Item

B. Roefaro, Maryann, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address PO Box 2

City Camillus	State NY	Zip Code 13031-0002
------------------	-------------	------------------------

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

Name of Employer (for Individual) Hematology-Oncology Associates of CNY	Occupation (for Individual) CEO
--	------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

Transaction ID : C8A559CA482647E7BA74

Amount of Each Receipt this Period
1000.00

Memo Item

C. Rohan, Christine, C, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
595.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2020

Transaction ID : 202008059415-18

Amount of Each Receipt this Period
35.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	3535.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 60 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-17
 Amount of Each Receipt this Period 35.00
 Memo Item

B. Samitt, Craig E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 64560
 City Saint Paul State MN Zip Code 55164-0560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) President & Chief Executive Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2125.00

Date of Receipt 08 / 07 / 2020
Transaction ID : 2020091116254-9
 Amount of Each Receipt this Period 125.00
 Memo Item

C. Samitt, Craig E, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 64560
 City Saint Paul State MN Zip Code 55164-0560
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) President & Chief Executive Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2125.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020091116254-18
 Amount of Each Receipt this Period 125.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	285.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 61 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-75
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-74
 Amount of Each Receipt this Period 50.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-22
 Amount of Each Receipt this Period 55.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-21
 Amount of Each Receipt this Period 55.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-90
 Amount of Each Receipt this Period 30.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-88
 Amount of Each Receipt this Period 30.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Date of Receipt
 08 / 06 / 2020
Transaction ID : 202008059415-67
 Amount of Each Receipt this Period 192.30
 Memo Item

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

Date of Receipt
 08 / 20 / 2020
Transaction ID : 2020081816135-66
 Amount of Each Receipt this Period 192.30
 Memo Item

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

Date of Receipt
 08 / 06 / 2020
Transaction ID : 202008059415-30
 Amount of Each Receipt this Period 25.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-29
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-110
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-107
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	75.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 65 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Simpson, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 206 Scottholm Blvd
 City Syracuse State NY Zip Code 13224-1730
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus BCBS Occupation (for Individual) Board Member
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 0784806225F040D0BBDD
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Snyder, Julia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 Starin Ave
 City Buffalo State NY Zip Code 14216-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BlueCross BlueShield of Western New Yo Occupation (for Individual) VP, Corporate Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 6E99C183A19241F29412
 Amount of Each Receipt this Period 60.00
 Memo Item

C. Snyder, Julia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 Starin Ave
 City Buffalo State NY Zip Code 14216-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BlueCross BlueShield of Western New Yo Occupation (for Individual) VP, Corporate Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 06 / 2020
Transaction ID : CADD35C1C60D48CA9D33
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1100.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Snyder, Julia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 385 Starin Ave
 City Buffalo State NY Zip Code 14216-2030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BlueCross BlueShield of Western New Yo Occupation (for Individual) VP, Corporate Relations
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 26E15D74EE964367B7CA
 Amount of Each Receipt this Period 40.00
 Memo Item

B. Sodaro, Kenneth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 25 Redbrick Rd
 City Orchard Park State NY Zip Code 14127-3940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Western New York Occupation (for Individual) Sr. VP
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 23909EFC3CD04B2F90E4
 Amount of Each Receipt this Period 300.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-88
 Amount of Each Receipt this Period 35.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-86
 Amount of Each Receipt this Period 35.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-39
 Amount of Each Receipt this Period 30.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-38
 Amount of Each Receipt this Period 30.00
 Memo Item

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

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

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

FOR LINE NUMBER: PAGE 68 OF 88
(check only one)
 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 Association Pac

A. Stevens, Gill, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Grassrts and Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-4
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Stevens, Gill, R, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1310 G St NW
 City Washington State DC Zip Code 20005-3000
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Dir Grassrts and Advocacy
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-4
 Amount of Each Receipt this Period 30.00
 Memo Item

C. Stewart, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Exchange St
 City Providence State RI Zip Code 02903-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhose Island Occupation (for Individual) Chief Accountning Officer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 07 / 2020
Transaction ID : 202008101395-11
 Amount of Each Receipt this Period 20.00
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Stewart, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 500 Exchange St
 City Providence State RI Zip Code 02903-2630
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BCBS of Rhose Island Occupation (for Individual) Chief Accountning Officer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 08 / 21 / 2020
Transaction ID : 2020081922534-11
 Amount of Each Receipt this Period 20.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-50
 Amount of Each Receipt this Period 95.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-49
 Amount of Each Receipt this Period 95.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 70 OF 88
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Summers, Bondanzia, Platania, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2695 Thompson Dr

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2020

Transaction ID : 202008059415-82

Amount of Each Receipt this Period
25.00

Memo Item

B. Summers, Bondanzia, Platania, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2695 Thompson Dr

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
425.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : 2020081816135-81

Amount of Each Receipt this Period
25.00

Memo Item

C. Sweet, Judith, V., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 3558 South St

City Clinton	State NY	Zip Code 13323-1700
-----------------	-------------	------------------------

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

Name of Employer (for Individual) Excellus BlueCross BlueShield	Occupation (for Individual) Board Member
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

Transaction ID : 0B0E3805E653436A8D04

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1050.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt
 08 / 06 / 2020
Transaction ID : 202008059415-48
 Amount of Each Receipt this Period 55.00
 Memo Item

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

Date of Receipt
 08 / 20 / 2020
Transaction ID : 2020081816135-47
 Amount of Each Receipt this Period 55.00
 Memo Item

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

Date of Receipt
 08 / 06 / 2020
Transaction ID : 202008059415-1
 Amount of Each Receipt this Period 60.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	170.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Taylor, Pat, Bonkiewicz, ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 5226 Cahaba Valley Cv

City Birmingham	State AL	Zip Code 35242-3308
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) ED IT Informatics
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1020.00

Date of Receipt
08 / 20 / 2020
Transaction ID : 2020081816135-1

Amount of Each Receipt this Period
60.00

Memo Item

B. Thornton, Barry, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 45 Woodgreen Dr

City Pittsford	State NY	Zip Code 14534-9437
-------------------	-------------	------------------------

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

Name of Employer (for Individual) Excellus	Occupation (for Individual) Sr. Vice President
---	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
08 / 03 / 2020
Transaction ID : 29614A55F67144789C14

Amount of Each Receipt this Period
2500.00

Memo Item

C. Tidmarsh, Lachlan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

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

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

Name of Employer (for Individual) BCBSA	Occupation (for Individual) payrollLoadCreatedOccupat
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
850.00

Date of Receipt
08 / 06 / 2020
Transaction ID : 202008059415-46

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2610.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Tidmarsh, Lachlan, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 225 N Michigan Ave

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

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

Name of Employer (for Individual) BCBSA	Occupation (for Individual) payrollLoadCreatedOccupat
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : 2020081816135-45

Amount of Each Receipt this Period
50.00

Memo Item

B. Towey, Jennifer Deloggio, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 S Rolfe St

City Arlington	State VA	Zip Code 22204-4792
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BCBSA	Occupation (for Individual) payrollLoadCreatedOccupat
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		06		2020

Transaction ID : 202008059415-105

Amount of Each Receipt this Period
20.00

Memo Item

C. Towey, Jennifer Deloggio, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1005 S Rolfe St

City Arlington	State VA	Zip Code 22204-4792
-------------------	-------------	------------------------

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

Name of Employer (for Individual) BCBSA	Occupation (for Individual) payrollLoadCreatedOccupat
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
340.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2020

Transaction ID : 2020081816135-102

Amount of Each Receipt this Period
20.00

Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. Trimble, James, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6017 Shady Oak Ln
 City Bethesda State MD Zip Code 20817-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Political Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3264.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-86
 Amount of Each Receipt this Period 192.00
 Memo Item

B. Trimble, James, B, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6017 Shady Oak Ln
 City Bethesda State MD Zip Code 20817-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED Political Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3264.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-84
 Amount of Each Receipt this Period 192.00
 Memo Item

C. Tully, David, Ryan, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4012 Van Buren St
 City University Park State MD Zip Code 20782-1413
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) Executive Washington Rep
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-83
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	434.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-119
 Amount of Each Receipt this Period 36.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-116
 Amount of Each Receipt this Period 36.00
 Memo Item

C. Vachon, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Admin Services & Chief of Staff Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 3264.00

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-32
 Amount of Each Receipt this Period 192.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	264.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 88
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Vachon, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 225 N Michigan Ave
 City Chicago State IL Zip Code 60601-7757
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Admin Services & Chief of Staff Occupation (for Individual) EVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3264.00

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-31
 Amount of Each Receipt this Period 192.00
 Memo Item

B. White, Lisa, A, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Weathervane Way
 City Syracuse State NY Zip Code 13209-9681
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Excellus, Inc. Occupation (for Individual) Corporate VP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt 08 / 03 / 2020
Transaction ID : 6017F733E822403DB6B3
 Amount of Each Receipt this Period 1500.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-115
 Amount of Each Receipt this Period 40.00
 Memo Item

SUBTOTAL of Receipts This Page (optional)..... ▶ 1732.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-112
 Amount of Each Receipt this Period 40.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-44
 Amount of Each Receipt this Period 55.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-43
 Amount of Each Receipt this Period 55.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 78 OF 88
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-94
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 20 / 2020
Transaction ID : 2020081816135-92
 Amount of Each Receipt this Period 25.00
 Memo Item

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

Date of Receipt 08 / 06 / 2020
Transaction ID : 202008059415-85
 Amount of Each Receipt this Period 50.00
 Memo Item

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 88
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Yoder, David, , ,

Mailing Address 8408 Terry Lee Way

City Severn	State MD	Zip Code 21144-3466
----------------	-------------	------------------------

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

Name of Employer (for Individual) Blue Cross and Blue Shield Association	Occupation (for Individual) ED Integrated Care Mgmt
---	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 20 / 2020

Transaction ID : 2020081816135-83

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	50.00
TOTAL This Period (last page this line number only).....▶	48513.10

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 80 OF 88
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Blue Cross And Blue Shield Of Kansas City Federal PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 2301 Main St

City Kansas City	State MO	Zip Code 64108
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00301358

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

Transaction ID : 25F05412D664401AB558

Amount of Each Receipt this Period
10000.00

Memo Item
Transfer from affiliated PAC

B. Blue Cross And Blue Shield Of Kansas, Inc. Employee PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 1133 SW Topeka Blvd
CC:855 - B3

City Topeka	State KS	Zip Code 66629
----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00197202

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4788.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

Transaction ID : A7A41A5ECCCD48399DB1

Amount of Each Receipt this Period
684.00

Memo Item
Transfer from affiliated PAC

C. Healthy Government Committee-The Political Action Committee Of Blue Cross & Blue Shield Of Arizona,

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address PO Box 13466

City Phoenix	State AZ	Zip Code 85002
-----------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00215202

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
7500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2020

Transaction ID : 55E562A45DC440F29A8B

Amount of Each Receipt this Period
7500.00

Memo Item
Transfer from affiliated PAC

SUBTOTAL of Receipts This Page (optional).....	18184.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 81 OF 88
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

A. Independence Blue Cross PAC (IBC PAC)

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

Mailing Address 1901 Market St

City Philadelphia	State PA	Zip Code 19103
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00450056

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		03		2020

Transaction ID : EF52BC33415048B58ADC

Amount of Each Receipt this Period
10000.00

Memo Item
Transfer from affiliated PAC

B.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	28184.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 82 OF 88
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Stephanie Murphy For Congress

Mailing Address PO Box 205

City Winter Park State FL Zip Code 32790

FEC ID number of contributing federal political committee. **C** C00620443

Name of Employer (for Individual) Occupation (for Individual)

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 13 / 2020

Transaction ID : AFECBEBAC0A0805254

Amount of Each Receipt this Period
1000.00

Memo Item
Refund of 2020 Primary Contribution

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	1000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)
A. Ann Wagner For Congress

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2020

Mailing Address PO Box 50

FEC Identification Number

C C00495846
Transaction ID : C09F92DE8A
Amount of Each Disbursement this Period

2500.00

City Ballwin State MO Zip Code 63022-0050

Purpose of Disbursement 2020 Primary
Candidate Name **Wagner, Ann, Louise, ,**
Category/Type **011**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: MO District: 02

Memo Item

Full Name (Last, First, Middle Initial)
B. Bluegrass Committee

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		03		2020

Mailing Address 220 1/2 E St NE

FEC Identification Number

C C00235655
Transaction ID : 0A97BA100A:
Amount of Each Disbursement this Period

5000.00

City Washington State DC Zip Code 20002

Purpose of Disbursement 2020 Contribution
Candidate Name **Bluegrass Committee**
Category/Type **011**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) Contribution
State: District:

Memo Item

Full Name (Last, First, Middle Initial)
C. Capito For West Virginia

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		27		2020

Mailing Address PO Box 11519

FEC Identification Number

C C00539825
Transaction ID : D0FA96E51C
Amount of Each Disbursement this Period

2000.00

City Charleston State WV Zip Code 25339

Purpose of Disbursement 2020 General
Candidate Name **Capito, Shelley, Moore, ,**
Category/Type **011**

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: WV District:

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

9500.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. Courtney For Congress		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address PO Box 1372		FEC Identification Number C00410233 Transaction ID : 5506D0992Ct Amount of Each Disbursement this Period 1000.00
City Vernon	State CT	Zip Code 06066
Purpose of Disbursement 2020 Primary		011 Category/ Type
Candidate Name Courtney, Joseph, D., ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CT	District: 02	

Full Name (Last, First, Middle Initial) B. Friends Of Dick Durbin Committee		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address PO Box 1949		FEC Identification Number C00148999 Transaction ID : C1BFD5348E Amount of Each Disbursement this Period 1000.00
City Springfield	State IL	Zip Code 62705
Purpose of Disbursement 2020 General		011 Category/ Type
Candidate Name Durbin, Richard, Joseph, ,		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District:	

Full Name (Last, First, Middle Initial) C. Jim Risch For U.S. Senate Committee		Date of Disbursement MM / DD / YYYY 08 / 03 / 2020
Mailing Address 407 W Jefferson St		FEC Identification Number C00440362 Transaction ID : 6AB7DE193E Amount of Each Disbursement this Period 2500.00
City Boise	State ID	Zip Code 83702-6049
Purpose of Disbursement 2020 General		011 Category/ Type
Candidate Name Risch, James, E., ,		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: ID	District:	

SUBTOTAL of Disbursements This Page (optional)..... ▶

4500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Bluepac - Blue Cross Blue Shield Association Pac

Full Name (Last, First, Middle Initial)

A. Kansans For Marshall

Mailing Address PO Box 1588

City
Great Bend

State
KS

Zip Code
67530

Purpose of Disbursement
2020 General

011

Candidate Name

Marshall, Roger, W., ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: KS District:

Date of Disbursement

MM / DD / YYYY
08 / 06 / 2020

FEC Identification Number

C C00576173

Transaction ID : 0A674A3F4A

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. McConnell For Majority Leader Committee

Mailing Address 228 S Washington St
Ste 115

City
Alexandria

State
VA

Zip Code
22314

Purpose of Disbursement
2020 Contribution

011

Candidate Name

McConnell For Majority Leader Committee

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) Contribution

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2020

FEC Identification Number

C C00548651

Transaction ID : 6180FB760AE

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. McConnell Senate Committee

Mailing Address PO Box 1496

City
Louisville

State
KY

Zip Code
40201

Purpose of Disbursement
2020 General

011

Candidate Name

McConnell, Mitch, , ,

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: KY District:

Date of Disbursement

MM / DD / YYYY
08 / 03 / 2020

FEC Identification Number

C C00193342

Transaction ID : 8D24E6C7AE

Amount of Each Disbursement this Period

5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

7000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Bluepac - Blue Cross Blue Shield Association Pac

Full Name (Last, First, Middle Initial)

A. McKinley For Congress

Mailing Address PO Box 642

City
Morgantown

State
WV

Zip Code
26507

Purpose of Disbursement
2020 General

011

Category/
Type

Candidate Name

McKinley, David, B., ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: WV District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2020

FEC Identification Number

C C00473132

Transaction ID : 20EE16F3AA

Amount of Each Disbursement this Period

1250.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Michael Burgess For Congress

Mailing Address PO Box 2334

City
Denton

State
TX

Zip Code
76202-2334

Purpose of Disbursement
2020 General

011

Category/
Type

Candidate Name

Burgess, Michael, Clifton, ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: TX District: 26

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2020

FEC Identification Number

C C00372532

Transaction ID : B9E321AB0F

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Rodney For Congress

Mailing Address PO Box 344

City
Taylorville

State
IL

Zip Code
62568-0344

Purpose of Disbursement
2020 General

011

Category/
Type

Candidate Name

Davis, Rodney, Lee, ,

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: IL District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08	/	27	/	2020

FEC Identification Number

C C00521948

Transaction ID : 88B47AAB5C

Amount of Each Disbursement this Period

1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3250.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. Rosen For Nevada

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 27195

City Las Vegas State NV Zip Code 89126

Purpose of Disbursement 2024 Primary

Candidate Name Rosen, Jacky, , ,

Office Sought: House Senate President

Disbursement For: 2024 Primary General Other (specify) ▼

State: NV District:

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C00606939
Transaction ID : A32932E56B
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. Sires For Congress

Full Name (Last, First, Middle Initial)
Mailing Address 6050 Kennedy Blvd E Apt 6B

City West New York State NJ Zip Code 07093

Purpose of Disbursement 2020 General

Candidate Name Sires, Albio, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NJ District: 08

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C00410753
Transaction ID : 72765168226I
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. Texans For Jodey Arrington

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 6687

City Lubbock State TX Zip Code 79493-6687

Purpose of Disbursement 2020 General

Candidate Name Arrington, Jodey, Cook, ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: TX District: 19

Date of Disbursement: 08 / 03 / 2020

FEC Identification Number: C00588657
Transaction ID : 45B5FBB01F
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

A. Young For Iowa, Inc.

Mailing Address PO Box 162

City Van Meter State IA Zip Code 50261

Purpose of Disbursement
2020 General

010
 011
Category/
Type

Candidate Name
Young, David, Edmund, ,

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) ▼
State: IA District: 03

Date of Disbursement

M M / D D / Y Y Y Y
08 / 06 / 2020

FEC Identification Number

C C00545616

Transaction ID : 3FBF1E4906f
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify)
State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For:
 Primary General
 Other (specify) ▼
State: District:

Date of Disbursement

M M / D D / Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1000.00

28250.00