

# 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:
- |   |                                      |                                       |  |
|---|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2)            | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input checked="" type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4)            | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

- (d) 30-Day POST-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y 02 / 01 / 2018 through 02 / 28 / 2018

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

Signature of Treasurer Didawick, Kathy, , , [Electronically Filed] Date 06 / 14 / 2018

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)

Page 2

Write or Type Committee Name

**Bluepac - Blue Cross Blue Shield Association Pac**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2018"/>		154072.24
(b) Cash on Hand at Beginning of Reporting Period.....	116261.14	
(c) Total Receipts (from Line 19) .....	56652.35	72341.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	172913.49	226413.49
7. Total Disbursements (from Line 31).....	92200.00	145700.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	80713.49	80713.49
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> 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).....	4996.93	5704.23
(ii) Unitemized .....	6655.42	17953.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	11652.35	23657.25
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11652.35	23657.25
12. Transfers From Affiliated/Other Party Committees.....	45000.00	47684.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	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)).....▶	56652.35	72341.25
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	56652.35	72341.25

**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.....	92200.00	145700.00
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)) ..	92200.00	145700.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	92200.00	145700.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	11652.35	23657.25
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11652.35	23657.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Form/Schedule: F3XA  
Transaction ID :

Amended because prior report was amended and there was a change to the beginning balance.

Form/Schedule:  
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 39
	<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. 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 ▼ 385.00

Date of Receipt **02 / 08 / 2018**  
**Transaction ID : 2018020616204-125**  
 Amount of Each Receipt this Period 95.00  
 Memo Item

**B. 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 ▼ 385.00

Date of Receipt **02 / 22 / 2018**  
**Transaction ID : 2018022016504-125**  
 Amount of Each Receipt this Period 100.00  
 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 ▼ 220.00

Date of Receipt **02 / 22 / 2018**  
**Transaction ID : 2018022016504-66**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line 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 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Cerisano, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5552 Sequoia Farms Dr  
 City Centreville State VA Zip Code 20120-3302  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Federal Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt **02 / 08 / 2018**  
**Transaction ID : 2018020616204-113**  
 Amount of Each Receipt this Period 95.00  
 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 ▼ 380.00

Date of Receipt **02 / 22 / 2018**  
**Transaction ID : 2018022016504-112**  
 Amount of Each Receipt this Period 95.00  
 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 ▼ 260.00

Date of Receipt **02 / 22 / 2018**  
**Transaction ID : 2018022016504-79**  
 Amount of Each Receipt this Period 65.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	255.00
<b>TOTAL</b> This Period (last page this line 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 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

**A. Corso, David, S, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 N Michigan Ave  
 City Chicago State IL Zip Code 60601-7757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) ED PlanConnexion  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-25**  
 Amount of Each Receipt this Period 60.00  
 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 ▼ 380.00

Date of Receipt 02 / 08 / 2018  
**Transaction ID : 2018020616204-115**  
 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 ▼ 380.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-114**  
 Amount of Each Receipt this Period 95.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	250.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. Drelick, Bob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6841 NW 117th Ave  
 City Parkland State FL Zip Code 33076-3320  
 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 & CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 02 / 08 / 2018  
**Transaction ID : 2018020616204-14**  
 Amount of Each Receipt this Period 80.00  
 Memo Item

**B. Drelick, Bob, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6841 NW 117th Ave  
 City Parkland State FL Zip Code 33076-3320  
 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 & CIO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-14**  
 Amount of Each Receipt this Period 80.00  
 Memo Item

**C. 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 ▼ 232.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-113**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	218.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. Gerrard, Paul, John Julian, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1416 Willow Ave  
 City Louisville State KY Zip Code 40204-2508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP Strategic Comm  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 232.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-88**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**B. Guyette, Michael, , ,**  
 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) President & Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 09 / 2018  
**Transaction ID : 2018020719204-9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Guyette, Michael, , ,**  
 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) President & Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 02 / 23 / 2018  
**Transaction ID : 201802201953-9**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	258.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. 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 ▼ 232.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-7**  
 Amount of Each Receipt this Period 58.00  
 Memo Item

**B. 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 ▼ 600.00

Date of Receipt 02 / 08 / 2018  
**Transaction ID : 2018020616204-96**  
 Amount of Each Receipt this Period 150.00  
 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 ▼ 600.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-95**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	358.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. Hayes, Cain-Aten, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Blue Cross Rd  
 City Eagan State MN Zip Code 55122-1154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) EVP COO & Pres Health Business  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **02 / 09 / 2018**  
**Transaction ID : 2018020719204-14**  
 Amount of Each Receipt this Period 150.00  
 Memo Item

**B. Hayes, Cain-Aten, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Blue Cross Rd  
 City Eagan State MN Zip Code 55122-1154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) EVP COO & Pres Health Business  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt **02 / 23 / 2018**  
**Transaction ID : 201802201953-14**  
 Amount of Each Receipt this Period 150.00  
 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 ▼ 310.00

Date of Receipt **02 / 08 / 2018**  
**Transaction ID : 2018020616204-121**  
 Amount of Each Receipt this Period 95.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	395.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. 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 ▼ 310.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-120**  
 Amount of Each Receipt this Period 95.00  
 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 ▼ 300.00

Date of Receipt 02 / 08 / 2018  
**Transaction ID : 2018020616204-49**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

**C. Hedges, Kari, J, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 225 N Michigan Ave  
 City Chicago State IL Zip Code 60601-7757  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) SVP Comm Mkts Data Strat  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-49**  
 Amount of Each Receipt this Period 75.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	245.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. Holland, Kim, Diane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4952 Westbriar Dr  
 City Fort Worth State TX Zip Code 76109-3132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP State Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 02 / 08 / 2018  
**Transaction ID : 2018020616204-106**  
 Amount of Each Receipt this Period 85.00  
 Memo Item

**B. Holland, Kim, Diane, ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4952 Westbriar Dr  
 City Fort Worth State TX Zip Code 76109-3132  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield Association Occupation (for Individual) VP State Affairs  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-105**  
 Amount of Each Receipt this Period 85.00  
 Memo Item

**C. Huckle, Tim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4111 S Rivershore Dr  
 City Moorhead State MN Zip Code 56560-5626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Noridian Occupation (for Individual) Health Insurer  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 266.66

Date of Receipt 02 / 02 / 2018  
**Transaction ID : 2018020110503-16**  
 Amount of Each Receipt this Period 133.33  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	303.33
<b>TOTAL</b> This Period (last page this line 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 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

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

Mailing Address 225 N Michigan Ave

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

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2018

**Transaction ID : 2018022016504-45**

Amount of Each Receipt this Period  
65.00

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 ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	09	/	2018

**Transaction ID : 20180208-5-8-30**

Amount of Each Receipt this Period  
90.00

Memo Item

**C. Keck, Kim, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 500 Exchange St

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

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

Name of Employer (for Individual) BCBS of Rhose Island	Occupation (for Individual) Presidents Office
---	--

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	23	/	2018

**Transaction ID : 2018022214504-5**

Amount of Each Receipt this Period  
90.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	245.00
<b>TOTAL</b> This Period (last page this line 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 39
<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 ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 08 / 2018  
**Transaction ID : 2018020616204-73**  
 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 ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2018  
**Transaction ID : 2018022016504-72**  
 Amount of Each Receipt this Period  
 110.00  
 Memo Item

**C. Matushak, Jay S, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Blue Cross Rd  
 City Eagan State MN Zip Code 55122-1154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr CFO & Assistant Secretary  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 23 / 2018  
**Transaction ID : 201802201953-12**  
 Amount of Each Receipt this Period  
 65.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	285.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. 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 ▼ 220.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-77**  
 Amount of Each Receipt this Period 55.00  
 Memo Item

**B. Myers, Rochelle Y, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Blue Cross Rd  
 City Eagan State MN Zip Code 55122-1154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Enterprise Strat & Perf Excellen  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt 02 / 23 / 2018  
**Transaction ID : 201802201953-3**  
 Amount of Each Receipt this Period 65.00  
 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 ▼ 380.00

Date of Receipt 02 / 08 / 2018  
**Transaction ID : 2018020616204-86**  
 Amount of Each Receipt this Period 95.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	215.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. 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 ▼ 380.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-85**  
 Amount of Each Receipt this Period 95.00  
 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 ▼ 420.00

Date of Receipt 02 / 08 / 2018  
**Transaction ID : 2018020616204-10**  
 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 ▼ 420.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-10**  
 Amount of Each Receipt this Period 105.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	305.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. 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 ▼ 240.00

Date of Receipt **02 / 22 / 2018**  
**Transaction ID : 2018022016504-2**  
 Amount of Each Receipt this Period 80.00  
 Memo Item

**B. Phillippe, Paula H, , ,**  
 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 HR & CSR  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **02 / 09 / 2018**  
**Transaction ID : 2018020719204-10**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Phillippe, Paula H, , ,**  
 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 HR & CSR  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt **02 / 23 / 2018**  
**Transaction ID : 201802201953-10**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	280.00
<b>TOTAL</b> This Period (last page this line 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 39
	<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. 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 ▼ 220.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-27**  
 Amount of Each Receipt this Period 55.00  
 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 ▼ 769.20

Date of Receipt 02 / 08 / 2018  
**Transaction ID : 2018020616204-75**  
 Amount of Each Receipt this Period 192.30  
 Memo Item

**C. 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 ▼ 769.20

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-74**  
 Amount of Each Receipt this Period 192.30  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	439.60
<b>TOTAL</b> This Period (last page this line 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 39
	<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. 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 ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2018  
**Transaction ID : 2018022016504-56**  
 Amount of Each Receipt this Period  
 60.00  
 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 ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2018  
**Transaction ID : 2018022016504-54**  
 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 ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 02 / 22 / 2018  
**Transaction ID : 2018022016504-1**  
 Amount of Each Receipt this Period  
 60.00  
 Memo Item

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 39
	<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. Trimble, James, B, ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7170 Woodmont Ave

City Chevy Chase	State MD	Zip Code 20815-6272
---------------------	-------------	------------------------

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 ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2018

**Transaction ID : 2018020616204-95**

Amount of Each Receipt this Period  
95.00

Memo Item

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

Mailing Address 7170 Woodmont Ave

City Chevy Chase	State MD	Zip Code 20815-6272
---------------------	-------------	------------------------

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 ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		22		2018

**Transaction ID : 2018022016504-94**

Amount of Each Receipt this Period  
95.00

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 ▼  
380.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02		08		2018

**Transaction ID : 2018020616204-39**

Amount of Each Receipt this Period  
95.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	285.00
<b>TOTAL</b> This Period (last page this line 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 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 <input type="checkbox"/> 11b <input type="checkbox"/> 14 <input type="checkbox"/> 11c <input type="checkbox"/> 15 <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. 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 ▼ 380.00

Date of Receipt 02 / 22 / 2018  
**Transaction ID : 2018022016504-39**  
 Amount of Each Receipt this Period 95.00  
 Memo Item

**B. Vanderheyden, Thomas C, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Blue Cross Rd  
 City Eagan State MN Zip Code 55122-1154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Pres & Pres of Diversified Busin  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 09 / 2018  
**Transaction ID : 2018020719204-13**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

**C. Vanderheyden, Thomas C, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3535 Blue Cross Rd  
 City Eagan State MN Zip Code 55122-1154  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Blue Cross and Blue Shield of Minnesot Occupation (for Individual) VP Sr Pres & Pres of Diversified Busin  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 02 / 23 / 2018  
**Transaction ID : 201802201953-13**  
 Amount of Each Receipt this Period 70.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	235.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4996.93



**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 39
<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 Nebraska PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 1919 Aksarben Drive PO Box 3248

City Omaha	State NE	Zip Code 68180-0001
---------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00276311

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2018

**Transaction ID : 3A195EE041334DE79261**

Amount of Each Receipt this Period  
8500.00

Memo Item  
Transfer from affiliated PAC

**B. Florida Health Political Action Committee (THE PAC OF BLUE CROSS & BLUE SHIELD OF FL, INC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address P.O. Box 6936  
4800 Deerwood Campus Parkwy, Dc3-4

City Jacksonville	State FL	Zip Code 32246
----------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00161141

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2018

**Transaction ID : EA2D50EDEA9C4AE18F72**

Amount of Each Receipt this Period  
25000.00

Memo Item  
Transfer from affiliated PAC

**C. Premera Blue Cross Political Action Committee/Premera PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address 7001 220Th Street SW  
Ms 355

City Mountlake Terrace	State WA	Zip Code 98043
---------------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00409227

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
11500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	12	/	2018

**Transaction ID : 6F0590771C0F47CCB382**

Amount of Each Receipt this Period  
11500.00

Memo Item  
Transfer from affiliated PAC

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45000.00
<b>TOTAL</b> This Period (last page this line number only).....	45000.00

**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) <b>A. 21St Century Majority Fund</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address Post Office Box 20475		FEC Identification Number C 000361956 <b>Transaction ID : A2C56F869F</b> Amount of Each Disbursement this Period 2500.00
City Atlanta	State GA	
Zip Code 30325-0475		Memo Item <input type="checkbox"/>
Purpose of Disbursement 2018 Contribution	Category/Type 011	
Candidate Name <b>21St Century Majority Fund</b>	Disbursement For: 2018	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: District:	Contribution	

Full Name (Last, First, Middle Initial) <b>B. Arkansas For Leadership Political Action Committee (ARKPAC)</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address PO Box 1672		FEC Identification Number C 000413948 <b>Transaction ID : FB3D809A3C</b> Amount of Each Disbursement this Period 2500.00
City Alexandria	State VA	
Zip Code 22313		Memo Item <input type="checkbox"/>
Purpose of Disbursement 2018 Contribution	Category/Type 011	
Candidate Name <b>Arkansas For Leadership Political Action Committee (ARKPAC)</b>	Disbursement For: 2018	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: District:	Contribution	

Full Name (Last, First, Middle Initial) <b>C. Bill Cassidy For US Senate</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2018
Mailing Address PO Box 80505		FEC Identification Number C 000543983 <b>Transaction ID : 6B91F43981I</b> Amount of Each Disbursement this Period 1000.00
City Baton Rouge	State LA	
Zip Code 70898-0505		Memo Item <input type="checkbox"/>
Purpose of Disbursement 2020 Primary	Category/Type 011	
Candidate Name <b>Cassidy, William, , ,</b>	Disbursement For: 2020	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/>	
State: LA District:	Contribution	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	6000.00
<b>TOTAL</b> 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) <b>A. Bill Flores For Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address PO Box 6207		FEC Identification Number C C00472241 <b>Transaction ID : 5366AFD63B</b> Amount of Each Disbursement this Period 2000.00
City Bryan	State TX	Zip Code 77805
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name <b>Flores, William, H., ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX	District: 17	

Full Name (Last, First, Middle Initial) <b>B. Cole For Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address P.O. Box 722256		FEC Identification Number C C00379735 <b>Transaction ID : 7DD2B1CFAC</b> Amount of Each Disbursement this Period 1000.00
City Norman	State OK	Zip Code 73070
Purpose of Disbursement 2018 Primary		011 Category/ Type
Candidate Name <b>Cole, Thomas, Jeffery, ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK	District: 04	

Full Name (Last, First, Middle Initial) <b>C. Common Values PAC</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address 901 N Washington St, Suite 700		FEC Identification Number C C00442368 <b>Transaction ID : 28659A9E2B</b> Amount of Each Disbursement this Period 3000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement 2018 Contribution		011 Category/ Type
Candidate Name <b>Common Values PAC</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

6000.00

**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. Conor Lamb For Congress**

Mailing Address PO Box 10381

City Pittsburgh State PA Zip Code 15234

Purpose of Disbursement  
2018 Primary - Original check issued 12/19/17

011

Candidate Name  
**Lamb, Conor, J., ,**

Office Sought:  House  
 Senate  
 President  
State: PA District: 17

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 28 / 2018

FEC Identification Number

C00657411

Transaction ID : **5EB830F908C**

Amount of Each Disbursement this Period

- 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Cramer For Senate**

Mailing Address PO Box 396

City Bismarck State ND Zip Code 58502-0396

Purpose of Disbursement  
2018 Primary

011

Candidate Name  
**Cramer, Kevin, John, ,**

Office Sought:  House  
 Senate  
 President  
State: ND District:

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2018

FEC Identification Number

C00504704

Transaction ID : **5163FC6A0A:**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Dakota Prairie PAC**

Mailing Address 918 Pennsylvania Ave SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
2018 Contribution

011

Candidate Name  
**Dakota Prairie PAC**

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼ Contribution

Date of Disbursement

MM / DD / YYYY  
02 / 20 / 2018

FEC Identification Number

C00536607

Transaction ID : **978261A305:**

Amount of Each Disbursement this Period

5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶

6500.00

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

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

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

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. DCCC**

Mailing Address 430 South Capitol Street, SE  
2Nd Floor

City  
Washington

State  
DC

Zip Code  
20003-4024

Purpose of Disbursement  
2018 Contribution

011

Category/  
Type

Candidate Name

**DCCC**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

Contribution

State:

District:

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2018

FEC Identification Number

C C00000935

**Transaction ID : 50BB291959I**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Denali Leadership PAC**

Mailing Address 701 8Th Street NW  
Suite 500

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
2018 Contribution

011

Category/  
Type

Candidate Name

**Denali Leadership PAC**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

Contribution

State:

District:

Date of Disbursement

MM / DD / YYYY  
02 / 08 / 2018

FEC Identification Number

C C00438291

**Transaction ID : 8168FD802A6**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. DSCC**

Mailing Address 120 Maryland Ave NE

City  
Washington

State  
DC

Zip Code  
20002

Purpose of Disbursement  
2018 Contribution

011

Category/  
Type

Candidate Name

**DSCC**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

Contribution

State:

District:

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2018

FEC Identification Number

C C00042366

**Transaction ID : F9C6EDFF11**

Amount of Each Disbursement this Period

5000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

12500.00

**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) <b>A. Elise For Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2018
Mailing Address PO Box 500		FEC Identification Number C00547893 <b>Transaction ID : 42BEED2BA</b> Amount of Each Disbursement this Period 2500.00
City Glens Falls	State NY	Zip Code 12801
Purpose of Disbursement 2018 General		011 Category/ Type
Candidate Name <b>Stefanik, Elise, M., ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>B. Elise For Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2018
Mailing Address PO Box 500		FEC Identification Number C00547893 <b>Transaction ID : 3DC54736887</b> Amount of Each Disbursement this Period - 2500.00
City Glens Falls	State NY	Zip Code 12801
Purpose of Disbursement 2018 Primary - Original check issued 1/5/18		011 Category/ Type
Candidate Name <b>Stefanik, Elise, M., ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: NY	District: 21	

Full Name (Last, First, Middle Initial) <b>C. First State PAC</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address P.O. Box 3006		FEC Identification Number C00363648 <b>Transaction ID : 7F2E8A6025</b> Amount of Each Disbursement this Period 5000.00
City Wilmington	State DE	Zip Code 19804
Purpose of Disbursement 2018 Contribution		011 Category/ Type
Candidate Name <b>First State PAC</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

5000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

**A. Friends Of Dennis Ross**

Full Name (Last, First, Middle Initial)  
Mailing Address Post Office Box 7310

City Lakeland State FL Zip Code 33807

Purpose of Disbursement  
2018 Primary

Candidate Name  
**Ross, Dennis, Alan, ,**

Office Sought:  House  Senate  President  
State: FL District: 15

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
02 / 20 / 2018

FEC Identification Number  
**C00459461**  
**Transaction ID : 82A40E17B2I**

Amount of Each Disbursement this Period  
1000.00

Memo Item

**B. Holding Onto Oregon's Priorities**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 3314

City Portland State OR Zip Code 97208

Purpose of Disbursement  
2018 Contribution

Candidate Name  
**Holding Onto Oregon's Priorities**

Office Sought:  House  Senate  President  
State: District: Contribution

Disbursement For: 2018  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
02 / 15 / 2018

FEC Identification Number  
**C00392738**  
**Transaction ID : 32ED29BD36I**

Amount of Each Disbursement this Period  
2500.00

Memo Item

**C. House Conservatives Fund**

Full Name (Last, First, Middle Initial)  
Mailing Address 228 S. Washington St., Ste. 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
2018 Contribution

Candidate Name  
**House Conservatives Fund**

Office Sought:  House  Senate  President  
State: District: Contribution

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
02 / 16 / 2018

FEC Identification Number  
**C00326439**  
**Transaction ID : D581CFAA2I**

Amount of Each Disbursement this Period  
2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

6000.00

**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) <b>A. Hudson For Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address PO Box 5053		FEC Identification Number C00504522 <b>Transaction ID : A5B8B5F16A</b> Amount of Each Disbursement this Period 2000.00
City Concord	State NC	Zip Code 28027
Purpose of Disbursement 2018 Primary		011 Category/ Type
Candidate Name <b>Hudson, Richard, Lane, , Jr.</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC	District: 08	

Full Name (Last, First, Middle Initial) <b>B. LaHood for Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address P.O. Box 10735		FEC Identification Number C00575050 <b>Transaction ID : B142FDCFE3</b> Amount of Each Disbursement this Period 2500.00
City Peoria	State IL	Zip Code 61612
Purpose of Disbursement 2018 Primary		011 Category/ Type
Candidate Name <b>LaHood, Darin, M., ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: IL	District: 18	

Full Name (Last, First, Middle Initial) <b>C. Majority Committee PAC--Mc PAC</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address PO Box 10134		FEC Identification Number C00428052 <b>Transaction ID : 291EF37E79</b> Amount of Each Disbursement this Period 5000.00
City Bakersfield	State CA	Zip Code 93389-0134
Purpose of Disbursement 2018 Contribution		011 Category/ Type
Candidate Name <b>Majority Committee PAC--Mc PAC</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

9500.00

**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. Making America Prosperous PAC**

Mailing Address PO Box 2485

City  
Springfield

State  
VA

Zip Code  
22152-0485

Purpose of Disbursement  
2018 Contribution

011

Category/  
Type

Candidate Name

**Making America Prosperous PAC**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State:

District:

Contribution

Date of Disbursement

MM / DD / YYYY  
02 / 26 / 2018

FEC Identification Number

C C00445379

**Transaction ID : BEDEA2C44**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Making Investments Majority Insured PAC**

Mailing Address 9070 Irvine Center Drive, #150

City  
Irvine

State  
CA

Zip Code  
92618

Purpose of Disbursement  
2018 Contribution

011

Category/  
Type

Candidate Name

**Making Investments Majority Insured PAC**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify)

State:

District:

Contribution

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2018

FEC Identification Number

C C00564658

**Transaction ID : 75A0A1B67A**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Michael Burgess For Congress**

Mailing Address PO Box 2334

City  
Denton

State  
TX

Zip Code  
76202-2334

Purpose of Disbursement  
2018 Primary

011

Category/  
Type

Candidate Name

**Burgess, Michael, Clifton, ,**

Office Sought:

House  
 Senate  
 President

Disbursement For: 2018

Primary  General  
 Other (specify) ▼

State: TX

District: 26

Contribution

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2018

FEC Identification Number

C C00372532

**Transaction ID : 0A9DD64FA**

Amount of Each Disbursement this Period

1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

8500.00

**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) <b>A. Moving America Forward</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address 972 W. Whitmire Drive		FEC Identification Number C00375451 <b>Transaction ID : 5FE3FD4F36!</b> Amount of Each Disbursement this Period 5000.00
City Melbourne	State FL	Zip Code 32935
Purpose of Disbursement 2018 Contribution		011 Category/ Type
Candidate Name <b>Moving America Forward</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Contribution	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. Moving America Forward</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address 972 W. Whitmire Drive		FEC Identification Number C00375451 <b>Transaction ID : 4FD7168FC07</b> Amount of Each Disbursement this Period - 5000.00
City Melbourne	State FL	Zip Code 32935
Purpose of Disbursement 2018 Contribution - Original check issued 1/24/18		011 Category/ Type
Candidate Name <b>Moving America Forward</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Contribution	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. New Pioneers PAC</b>		Date of Disbursement MM / DD / YYYY 02 / 23 / 2018
Mailing Address 228 S Washington St Ste 115		FEC Identification Number C00459123 <b>Transaction ID : E09D4B3AF2</b> Amount of Each Disbursement this Period 1000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement 2018 Contribution		011 Category/ Type
Candidate Name <b>New Pioneers PAC</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Contribution	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1000.00
<b>TOTAL</b> 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) <b>A. Pat Roberts for U.S. Senate, Inc.</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2018
Mailing Address PO Box 433 PO Box 433		FEC Identification Number C00128876 <b>Transaction ID : 6133713C75A</b>
City Great Bend	State KS	Zip Code 67530-0433
Purpose of Disbursement 2020 Primary		011 Category/Type
Candidate Name <b>Roberts, Pat, , ,</b>		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: KS	District:	

Full Name (Last, First, Middle Initial) <b>B. People For Enterprise Trade And Economic Growth (PETE PAC)</b>		Date of Disbursement MM / DD / YYYY 02 / 15 / 2018
Mailing Address 22780 Indian Creek Dr Ste 100		FEC Identification Number C00363770 <b>Transaction ID : 771C5AAFD7</b>
City Dulles	State VA	Zip Code 20166-6716
Purpose of Disbursement 2018 Contribution		011 Category/Type
Candidate Name <b>People For Enterprise Trade And Economic Growth (PETE PAC)</b>		Amount of Each Disbursement this Period 5000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	Contribution

Full Name (Last, First, Middle Initial) <b>C. Pete Sessions For Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2018
Mailing Address PO Box 823047		FEC Identification Number C00303305 <b>Transaction ID : 936CD485A6</b>
City Dallas	State TX	Zip Code 75382-3047
Purpose of Disbursement 2018 General		011 Category/Type
Candidate Name <b>Sessions, Peter, Anderson, ,</b>		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: TX	District: 32	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

7000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Bluepac - Blue Cross Blue Shield Association Pac**

Full Name (Last, First, Middle Initial)

**A. Promoting Our Republican Team PAC**

Mailing Address 8331 Little Harbor Drive

City Cincinnati

State OH

Zip Code 45244-2768

Purpose of Disbursement  
2018 Contribution

011

Candidate Name

**Promoting Our Republican Team PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2018

FEC Identification Number

C C00440032

**Transaction ID : FE2CE1DF36**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Prosperity Action Inc.**

Mailing Address 320 1St Street SE

City Washington

State DC

Zip Code 20003

Purpose of Disbursement  
2018 Contribution

011

Candidate Name

**Prosperity Action Inc.**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY  
02 / 15 / 2018

FEC Identification Number

C C00377689

**Transaction ID : FA7E6FA88A**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Rely On Your Beliefs Fund**

Mailing Address One Constitution Ave NE Ste 300

City Washington

State DC

Zip Code 20003

Purpose of Disbursement  
2018 Contribution

011

Candidate Name

**Rely On Your Beliefs Fund**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify)

State: District:

Contribution

Date of Disbursement

MM / DD / YYYY  
02 / 05 / 2018

FEC Identification Number

C C00344648

**Transaction ID : 3156AEF032**

Amount of Each Disbursement this Period

2500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

10000.00

**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) <b>A. Richard E Neal For Congress Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 20 / 2018
Mailing Address 76 Magnolia Terrace		FEC Identification Number C C00226522 <b>Transaction ID : FF39D188D2!</b> Amount of Each Disbursement this Period 1500.00
City Springfield	State MA	Zip Code 01108
Purpose of Disbursement 2018 Primary		011 Category/ Type
Candidate Name <b>Neal, Richard, Edmund, ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MA	District: 01	

Full Name (Last, First, Middle Initial) <b>B. Roskam For Congress Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2018
Mailing Address P. O. Box 713		FEC Identification Number C C00410969 <b>Transaction ID : CC3092BA21!</b> Amount of Each Disbursement this Period 1000.00
City Wheaton	State IL	Zip Code 60187
Purpose of Disbursement 2018 Primary		011 Category/ Type
Candidate Name <b>Roskam, Peter, James, ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 06	

Full Name (Last, First, Middle Initial) <b>C. The Eye Of The Tiger Political Action Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 08 / 2018
Mailing Address PO Box 2485		FEC Identification Number C C00467431 <b>Transaction ID : 3FE5775049!</b> Amount of Each Disbursement this Period 5000.00
City Springfield	State VA	Zip Code 22152-0485
Purpose of Disbursement 2018 Contribution		011 Category/ Type
Candidate Name <b>The Eye Of The Tiger Political Action Committee</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

7500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) <b>A. Thom Tillis Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2018
Mailing Address PO Box 97396		FEC Identification Number C 000545772 <b>Transaction ID : 662C8C578A</b> Amount of Each Disbursement this Period 1000.00
City Raleigh	State NC	Zip Code 27624
Purpose of Disbursement 2020 Primary		011 Category/Type
Candidate Name <b>Tillis, Thomas, Roland, ,</b>		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" 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: NC	District:	

Full Name (Last, First, Middle Initial) <b>B. Todos Con Jennifer Inc. Db a Jennifer For Congress</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2018
Mailing Address PO Box 367111		FEC Identification Number C 000588392 <b>Transaction ID : 45673DD0ED</b> Amount of Each Disbursement this Period 2700.00
City San Juan	State PR	Zip Code 00936
Purpose of Disbursement 2020 Primary		011 Category/Type
Candidate Name <b>Gonzalez Colon, Jenniffer, A., ,</b>		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: PR	District: 01	

Full Name (Last, First, Middle Initial) <b>C. Value In Electing Women Political Action Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 05 / 2018
Mailing Address 701 8Th Street, NW Suite 500		FEC Identification Number C 000327189 <b>Transaction ID : 93AE810314</b> Amount of Each Disbursement this Period 1000.00
City Washington	State DC	Zip Code 20001
Purpose of Disbursement 2018 Contribution		011 Category/Type
Candidate Name <b>Value In Electing Women Political Action Committee</b>		Memo Item <input type="checkbox"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4700.00

**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. Van Drew For Congress**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 671

City Cape May Court House State NJ Zip Code 08210

Purpose of Disbursement 2018 Primary

Candidate Name **Van Drew, Jeff, , D.D.S.**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: NJ District: 02

Date of Disbursement: 02 / 15 / 2018

FEC Identification Number: C00661868  
Transaction ID : F9A59CD57F  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**B. VoteTipton.Com**

Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 1582

City Cortez State CO Zip Code 81321-1582

Purpose of Disbursement 2018 Primary

Candidate Name **Tipton, Scott, Randall, ,**

Office Sought:  House  Senate  President

Disbursement For: 2018  Primary  General  Other (specify) ▼

State: CO District: 03

Date of Disbursement: 02 / 26 / 2018

FEC Identification Number: C00470757  
Transaction ID : 7A08522AE8C  
Amount of Each Disbursement this Period: 1000.00

Category/Type: 011

Memo Item

**C.**

Full Name (Last, First, Middle Initial)  
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

2000.00

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

92200.00