

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

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

FOR LINE NUMBER: PAGE 53 OF 225

(check only one)

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

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NAME OF COMMITTEE (In Full)

Blue Cross Blue Shield of Michigan PAC

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

A. Gemmel, Derek, , ,

Mailing Address 31460 Adora Ln

City
Flat Rock

State
MI

Zip Code
48134-3330

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

06 / 22 / 2017

Transaction ID : A596F60F707104B039DD

Amount of Each Receipt this Period

416.00

☐ Memo Item

Payroll Deduction: \$32.00/Bi-Weekly

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

B. Moore, Mary, , ,

Mailing Address 24360 Crystal Drive

City
Flat Rock

State
MI

Zip Code
48134-8047

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

416.00

Date of Receipt

06 / 22 / 2017

Transaction ID : A72CED749EA25420E955

Amount of Each Receipt this Period

416.00

☐ Memo Item

Payroll Deduction: \$32.00/Bi-Weekly

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

C. Crosby, Chad, , ,

Mailing Address 23764 Copperwood Dr E

City
South Lyon

State
MI

Zip Code
48178-8269

FEC ID number of contributing
federal political committee.

C

Name of Employer (for Individual)
Blue Cross Blue Shield of Michigan

Occupation (for Individual)
Dir Bus Opt & Outcome Mgmt

Receipt For:

☐ Primary ☐ General
☐ Other (specify)

Aggregate Year-to-Date ▼

416.00

Date of Receipt

06 / 22 / 2017

Transaction ID : AAB8CBA5DE7EA4CCBA5

Amount of Each Receipt this Period

416.00

☐ Memo Item

Payroll Deduction: \$32.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional)..... ►

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

1248.00