



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

Cynthia Suzuki, Treasurer  
Foundation Health Systems Inc.  
Political Action Committee  
3400 Data Drive  
Rancho Cordova, CA 95670

SEP 16 1998

Identification Number: C00230789

Reference: July Monthly Report (6/1/98-6/30/98)

Dear Ms. Suzuki:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a multicandidate committee and its affiliates from making a contribution to a candidate for federal office in excess of \$5,000 per election.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of \$5,000 and/or notify the recipient in writing of your redesignation of the contribution. In the best interest of your committee, all refunds and redesignations should be made within sixty days of the treasurer's receipt of the contribution(s).

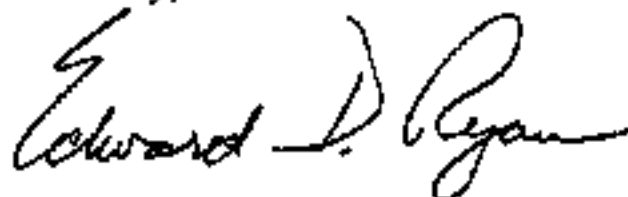
Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund request sent to the recipient committee(s). In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on

Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 694-1130.

Sincerely,

A handwritten signature in cursive script that reads "Edward D. Ryan". The signature is written in black ink and is positioned above the typed name and title.

Edward D. Ryan  
Reports Analyst  
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER		
23		

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)  
FOUNDATION HEALTH SYSTEMS, INC. FEC ID No. C 00230789

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stanhelm for Congress P. O. BOX 4879 ABILENE, TX 79608 ID# C00281141	MONETARY CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/98	1,000.00
B. Full Name, Mailing Address and ZIP Code Korn Dicks For Congress 400 NORTH CAPITOL ST, NW#363 WASHINGTON, DC 20001 ID# C00037606	MONETARY CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/02/98	2,000.00
C. Full Name, Mailing Address and ZIP Code Thornberry for Congress P. O. Box 9392 AMARILLO, TX 79101 ID# C00286187	MONETARY CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/24/98	1,000.00
D. Full Name, Mailing Address and ZIP Code J. C. Watts for Congress P. O. BOX 6545 NORMAN, OK 73070 ID# C00304949	MONETARY CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/24/98	1,000.00 <i>212</i>
E. Full Name, Mailing Address and ZIP Code Matt Fong for US Senate 770 L Street, Suite 900 Sacramento, CA 95814 ID# C00326538	MONETARY CONTRIBUTION Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	06/24/98	5,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	10,000.00
TOTAL This Period (last page this line number only)	10,000.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (or Full)

FOUNDATIONS HEALTH CORPORATION PAC

PEC ID No. C 00230789

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
NORM DICKS FOR CONGRESS P. O. BOX 1663 TACOMA, WA 98401	CONTRIBUTION WA - CD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/9/97	2,000.00
MATSUI FOR CONGRESS P. O. BOX 1347 SACRAMENTO, CA 95812	CONTRIBUTION CA - CD-5 Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/97	5,000.00
FRIENDS OF BOB LIVINGSTON P. O. BOX 6329 NEW ORLEANS, LA 70174	CONTRIBUTION LA - CD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/97	5,000.00
FRIENDS OF JC WATTS P. O. BOX 6545 NORMAN, OK 73074 C00304949	CONTRIBUTION OK - CD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/97	2,500.00 <i>See</i>
MATT FONG FOR US SENATE 808 S. FIGUEROA #860 LOS ANGELES, CA 90012	CONTRIBUTION US SENATE Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/30/97	5,000.00
FRIENDS OF BOB LIVINGSTON P. O. BOX 6329 NEW ORLEANS, LA 70174	CONTRIBUTION LA - CD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/04/97	5,000.00
NORM DICKS FOR CONGRESS P. O. BOX 1663 TACOMA, WA 98401	CONTRIBUTION WA-CD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	08/05/97	3,000.00
THORNBERRY FOR CONGRESS P. O. BOX 9392 AMARILLO, TX 79105	CONTRIBUTION TX -CD Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/5/97	1,000.00
FRIENDS OF JC WATTS P. O. Box 6545 NORMAN, OK 73074 C00304949	CONTRIBUTION OK - CD Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/4/97	2,500.00 <i>See</i>

SUBTOTAL of Disbursements This Page (optional) . . . . . 31,000.00

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

98-03-278-114

