REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
CAT PAC

ADDRESS (number and street) ☐ Check if different than previously reported
400 Capitol Mall, Suite 1560

CITY, STATE and ZIP CODE
Sacramento CA 95814

RECEIVED FEDERAL ELECTION COMMISSION
Nov 10 12 45 PM '97

2. FEC IDENTIFICATION NUMBER
C00326439

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☒ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 10/1/97 through 10/31/97		
6. (a) Cash on Hand January 1, 19 97		$ -0-
(b) Cash on Hand at Beginning of Reporting Period	$ 455.64	
(c) Total Receipts (from Line 19)	$ 11500.00	$ 26549.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 11955.64	$ 26549.00
7. Total Disbursements (from Line 30)	$ 3392.36	$ 17985.72
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 8563.28	$ 8563.28
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 David Bauer

Signature of Treasurer

Date 11/4/97

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

FEC FORM 3X
(revised 9/93)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: CAT PAC

REPORT COVERING PERIOD FROM 10/1/97 TO: 10/31/97

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	3500.00	11500.00	11(a)(i)
ii. Unitemized		549.00	11(a)(ii)
iii. Total (add i and ii) ➤	3500.00	12049.00	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	8000.00	14500.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	11500.00	26549.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	11500.00	26549.00	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	11500.00	26549.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	3392.36	7485.72	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	3392.36	7485.72	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees		10500.00	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3392.36	17985.72	30
31. Total Federal Disbursements (subtract line 21 a i from line 30) ➤	3392.36	17985.72	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	11500.00	26549.00	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	11500.00	26549.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	3392.36	7485.72	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	3392.36	7485.72	37

FE6AN135

SCHEDULE A ITEMIZED RECEIPTS

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

Page 1 OF

FOR LINE NUMBER 11(a)(i)

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)

CAT PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month day, year)	Amount of Each Receipt this Period
ERNEST ISTOOK FOR CONGRESS COMMITTEE 5400 N. GRAND, SUITE 100 Oklahoma City OK 73112 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: AUTHORIZED COMMITTEE Aggregate Year-to-date $ 1,000.00	10/7/97	1,000.00
FRIENDS OF JERRY SOLOMON P. O. BOX 459 Saratoga Springs NY 12866 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: AUTHORIZED COMMITTEE Aggregate Year-to-date $ 1,000.00	10/7/97	1,000.00
JAMES THOMAS M. 4323 N. 18TH ST. Arlington VA 22207 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Aggregate Year-to-date $ 250.00	10/24/97	250.00
KOGOVSEK RAY 650 THATCHER BLDG. Pueblo CO 81003 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Aggregate Year-to-date $ 250.00	10/24/97	250.00
PAXON FOR CONGRESS 1850 WINTON RD. SOUTH Rochester NY 14618 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: AUTHORIZED COMMITTEE Aggregate Year-to-date $ 1,000.00	10/7/97	1,000.00

SUBTOTAL of Receipts This Page (optional) 3,500.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2

FOR LINE NUMBER 11a1

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NAME OF COMMITTEE (In Full)

CAT PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	3500.00

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

Page 1 OF

FOR LINE NUMBER 11(c)

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

CAT PAC

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
AMERICAN MARITIME OFFICERS VOLUNTARY 650 4TH AVE. Brooklyn NY 11232	Occupation FEDERAL PAC	10/24/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 500.00		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month day, year)**	**Amount of Each Receipt this Period**
BROWN & WILLIAMSON TOCABBO CORP. P. O. BOX 35090 Louisville KY 40232	Occupation FEDERAL PAC	10/24/97	1,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 1,000.00		
Full Name, Mailing Address and ZIP Code	**Name of Employer**	**Date (month day, year)**	**Amount of Each Receipt this Period**
DEL WEBB CORP. EMPLOYEES FUND FOR BETTER 6001 N. 24TH ST. Phoenix AZ 85016	Occupation FEDERAL PAC	10/9/97	2,500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 2,500.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
FAITH, FAMILY AND FREEDOM PAC P. O. BOX 76766 Washington DC 20002	Occupation FEDERAL PAC	10/7/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 500.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
NATIONWIDE POLITICAL PARTICIPATION 1 NATIONWIDE PLAZA Columbus OH 43216	Occupation FEDERAL PAC	10/24/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 500.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
NRA-POLITICAL VICTORY FUND 11250 WAPLES MILL RD. Fairfax VA 22030	Occupation FEDERAL PAC	10/7/97	2,000.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 2,000.00		
Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
THE CHUBB CORP. PAC 15 MOUNTAIN VIEW RD. Plainfield NJ 07061	Occupation FEDERAL PAC	10/7/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 500.00		

SUBTOTAL of Receipts This Page (optional) 7,500.00

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

SCHEDULE A ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11(c)

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NAME OF COMMITTEE (In Full)

CAT PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month day, year)	Amount of Each Receipt this Period
USAA GROUP PAC USAA BUILDING San Antonio TX 78288	FEDERAL PAC	10/24/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 500.00		

SUBTOTAL of Receipts This Page (optional) 500.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)
CAT PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) ..... >	
TOTAL This Period (last page this line number only) ..... >	8000.00

FE6AN135

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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)

CAT PAC

A. Full Name, Mailing Address and ZIP Code Events Plus P.O. Box 3006 Oakton VA 22124	Purpose of Disbursement consulting Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/8/97	Amount of Each Disbursement This Period 1982.70
B. Full Name, Mailing Address and ZIP Code First Card P.O. Box 15062 Wilmington DE 19886	Purpose of Disbursement fundraising supplies Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 10/15/97	Amount of Each Disbursement This Period 1409.66
C. Full Name, Mailing Address and ZIP Code memo:Postmaster Oakton VA 22124	Purpose of Disbursement postage Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period 320.00
D. Full Name, Mailing Address and ZIP Code memo: Insty Prints 11230 Waples Mill Rd. Fairfax VA 22030	Purpose of Disbursement printing Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period 980.74
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ 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: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	3392.36

FEBRN135

Page 1 of 1 for
LINE NUMBER 10
(Use separate schedules for each numbered line)

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
CAT PAC				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor Events Plus P.O. Box 3006 Oakton VA 22124	1982.70	-0-	1982.70	-0-
Nature of Debt (Purpose): fundraising services				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	-0-
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

FEC-AN 135

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was recived.

☐	Hand Delivered	Date of Receipt
☑	First Class Mail	POSTMARKED 11/5/97
☐	Registerd/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

E.A. — PREPARER

11/10/97 — DATE PREPARED

(7/97)