REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

AUG 30 3 16 PM '99

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
WellPoint Health Networks "WELLPAC"

ADDRESS (number and street) ☐ Check if different than previously reported
21555 Oxnard Street

CITY, STATE and ZIP CODE
Woodland Hills, CA 91367

2. FEC IDENTIFICATION NUMBER
C00197226

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 03/01/99 through 03/31/99		
6. (a) Cash on Hand January 1, 19 99		$ 25,657.47
(b) Cash on Hand at Beginning of Reporting Period	$ 39,210.07	
(c) Total Receipts (from Line 19)	$ 6,849.80	$ 20,402.40
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 46,059.87	$ 46,059.87
7. Total Disbursements (from Line 30)	$ 3,500.00	$ 3,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 42,559.87	$ 42,559.87
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0.00	

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
Susan K. Nagy, Assistant Treasurer

Signature of Treasurer
Susan K. Nagy

Date
8/17/99

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 9/99)

4-00173

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

(revised 1/1/91)

NAME OF COMMITTEE WellPoint Health Networks "WELLPAC"

REPORT COVERING PERIOD FROM 03/01/99 TO: 03/31/99

	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)	2,515.62	4,265.86	11(a)(i)
ii. Unitemized	4,334.18	16,136.54	11(a)(ii)
iii. Total (add i and ii) ➤	6,849.80	20,402.40	11(a)(iii)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	0.00	0.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	6,849.80	20,402.40	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	0.00	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	6,849.80	20,402.40	19
20. Total Federal Receipts (subtract line 16 from line 19) ➤	6,849.80	20,402.40	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	3,500.00	3,500.00	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	0.00	0.00	28(d)
29. Other Disbursements	0.00	0.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3,500.00	3,500.00	30
31 Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	3,500.00	3,500.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	6,849.80	20,402.40	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	6,849.80	20,402.40	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 16)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	0.00	0.00	37

4-00173

SCHEDULE A **ITEMIZED RECEIPTS**

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

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)
WellPoint Health Networks "WELLPAC"

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Susan Blais Blais 28 Flintlock Lane Bell Canyon, CA 91307 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 375.00	Payroll Deduction	125.00 ($62.50 Biweekly)
B. Richard Ranelli Ranelli 2207 Westshore Lane Westlake Village, CA 91361 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 228.00	Payroll Deduction	76.00 ($38.00 Biweekly)
C. David Colby Colby 200 West Stafford Road Lake Sherwood, CA 91361 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 300.00	Payroll Deduction	100.00 ($244.73 Biweekly)
D. Joan Herman Herman 23224 Park Corniche Calabasas, CA 91302 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 420.00	Payroll Deduction	140.00 ($70.00 Biweekly)
E. Alice Rosenblatt Rosenblatt 5948 Annie Oakley Road Hidden Hills, CA 91302 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 240.00	Payroll Deduction	80.00 ($40.00 Biweekly)
F. Vincent Mace Mace 9 Gore Road Warner, NH 03278 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 300.00	Payroll Deduction	100.00 ($50.00 Biweekly)
G. Rebecca Kapustay Kapustay 3094 Bayshore Avenue Ventura, CA 93001 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 288.00	Payroll Deduction	96.00 ($48.00 Biweekly)

SUBTOTAL of Receipts This Page (optional) 717.00

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

4-00113

SCHEDULE A **ITEMIZED RECEIPTS**

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FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
WellPoint Health Networks "WELLPAC"

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Greg Baird Baird 25202 Bentwood Laguna Niguel, CA 92677 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 228.00	Payroll Deduction	76.00 ($40.00 Biweekly)
B. Leonard Schaeffer Schaeffer 120 South Via Merida Thousand Oaks, CA 91362 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 1,153.86	Payroll Deduction	384.62 ($192.31 Biweekly)
C. David Helwig Helwig 168 Colt Lane Thousand Oaks, CA 91361 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 288.00	Payroll Deduction	96.00 ($55.00 Biweekly)
D. David Ludwig Ludwig 3094 Bayshore Avenue Ventura, CA 93001 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 288.00	Payroll Deduction	96.00 ($48.00 Biweekly)
E. Thomas Levin Levin P O Box 2442 Malibu, CA 90265 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 348.00	Payroll Deduction	116.00 ($58.00 Biweekly)
F. Victor Diaz Diaz 10003 Lynbrook Dr Houston, TX 77042 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 270.00	Payroll Deduction	90.00 ($45.00 Biweekly)
G. Dennis Weinberg Weinberg 10641 Chippenham Rd. Camarillo, CA 93012 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date > $ 900.00	Payroll Deduction	300.00 ($192.30 Biweekly)

SUBTOTAL of Receipts This Page (optional) 1,158.62

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11 a i

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NAME OF COMMITTEE (In Full)
WellPoint Health Networks "WELLPAC"

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Rollin Lacy Lacy #1102 199 Massachusetts Avenue Boston, MA 02115 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 300.00	Payroll Deduction	100.00 ($50.00 Biweekly)
B. Ryan Trimble Trimble 27342 Lost Colt Drive Laguna Hills, CA 92653 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 300.00	Payroll Deduction	100.00 ($80.00 Biweekly)
C. J Van Berkem Van Berkem 23477 Park Colombo Calabasas, CA 91302 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 288.00	Payroll Deduction	96.00 ($55.00 Biweekly)
D. Ronald Ragland Ragland 4941 Inadale Avenue Los Angeles, CA 90043 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 228.00	Payroll Deduction	76.00 ($38.00 Biweekly)
E. John Garner Garner 10211 Valley Spring Ln Toluca Lake, CA 91602 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 288.00	Payroll Deduction	96.00 ($48.00 Biweekly)
F. Jacqueline Anderson Anderson 5779 Willowtree Drive Agoura Hills, CA 91301 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 240.00	Payroll Deduction	80.00 ($40.00 Biweekly)
G. Robert Crocker Crocker 100 Planters Grove Brandon, MS 39042 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-Date $ 276.00	Payroll Deduction	92.00 ($46.00 Biweekly)

SUBTOTAL of Receipts This Page (optional) 640.00

TOTAL This Period (last page this line number only) 2,515.82

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
WellPoint Health Networks "WELLPAC"

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Bill Frist 4205 Hillsboro Road #306 Nashville, TN 37215	Bill Frist, U.S. SENATE TN Disbursement for: [ ] Primary [ ] General [X] Other (specify)	03/16/99	1,000.00
B. BECERRA FOR CONGRESS NATIONAL DEMOCRATIC CLUB 30 IVY ST. SE WASHINGTON, DC 20013-5214	Xavier Becerra, U.S. HOUSE 30th CA Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/16/99	500.00
C. BILL THOMAS CAMPAIGN 444 N. CAPITOL ST. WASHINGTON, DC	Bill Thomas, U.S. HOUSE 21st CA Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/16/99	3,000.00
D. BUCK MCKEON FOR CONGRESS P.O. BOX 2071 SANTA CLARITA, CA 91386	Howard P. "Buck" McKeon, U.S. HOUSE Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/16/99	500.00
E. CONGRESSMAN CAL DOOLEY CAMPAIGN 44 CANAL CENTER PLAZA, STE.400 ALEXANDRIA, VA 22314	Calvin Dooley, U.S. HOUSE 20th CA Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/16/99	500.00
F. Ellen Tauscher For Congress 5611 Highland Rd Pleasanton, CA 94566	Ellen O. Tauscher, U.S. HOUSE 10th CA Disbursement for: [ ] Primary [ ] General [ ] Other (specify) 1999	03/16/99	500.00
G. The Mike Thompson for Congress Committee P.O. Box 1998 St. Helena, CA 94574	Mike Thompson, U.S. HOUSE 1st CA Disbursement for: [X] Primary [ ] General [ ] Other (specify) 2000	03/29/99	500.00
H. FRIENDS OF CUNNINGHAM P.O. BOX 40227 SAN DIEGO, CA 92164	Voided Check Disbursement for: [ ] Primary [X] General [ ] Other (specify) 1998	03/31/99	-500.00
I. Leadership Alliance 955 Executive Parkway Suite 201 Creavecour, MO 63131	Voided Check Disbursement for: [ ] Primary [ ] General [X] Other (specify)	03/31/99	-1,000.00

SUBTOTAL of Disbursements This Page (optional) 5,000.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
WellPoint Health Networks "WELLPAC"

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Greenwood For Congress 785 River Road Erwinna, PA 18920	Voided Check Disbursement for: [X] Primary [ ] General [ ] Other (specify) 1998	03/31/99	-500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Committee Preservation of Capitalism P.O. Box 22614 Alexandria, VA 22304	Voided Check Disbursement for: [ ] Primary [ ] General [X] Other (specify)	03/31/99	-1,000.00
C. 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
D. 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
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)	-1,500.00
TOTAL This Period (last page this line number only)	3,500.00

440173

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 received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☐	Registered/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): Priority Mail	Postmarked 8-23-99 and/or Date of Receipt
☐	Electronic Filing	

[illegible]	8-30-99
PREPARER	DATE PREPARED

(4/98)