HealthCare
COMPARE

3200 Highland Avenue Downers Grove, IL 60515-1282 (630) 241-7900

RECEIVED
FEDERAL ELECTION
COMMISSION

JUL 3 11 25 AM '97

July 1, 1997

Sent Via DHL

Federal Election Commission
999 E Street NW
Washington, DC 20463

Identification Number: C00217216

Reference: July 15, 1997 Quarterly Report

Dear Sir/Madam:

Enclosed is a copy of the above referenced report. If you have any questions, please call me or my assistant Pat Eisenhart at 630-241-7511.

Very truly yours,

Joseph E. Whitters
Treasurer

JEW:pme

Enclosure

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 3 11 29 AM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
HealthCare COMPARE Corp. (Political Action Committee)

ADDRESS (number and street) ☐ Check if different than previously reported
3200 Highland Avenue

CITY, STATE and ZIP CODE
Downers Grove, IL 60515

2. FEC IDENTIFICATION NUMBER
C00217216

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

[X] 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 [X] NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 1/1/97 through 6/30/97		
6. (a) Cash on Hand January 1, 1997		$203,088.61
(b) Cash on Hand at Beginning of Reporting Period	$203,088.61	
(c) Total Receipts (from Line 18)	$ 1,000.00	$ 1,000.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$204,088.61	$204,088.61
7. Total Disbursements (from Line 30)	$ 41,347.85	$ 41,347.85
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$162,740.76	$162,740.76
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

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
Joseph E. Whittere

Signature of Treasurer
Joseph E. Whittere

Date
7/2/97

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)

4-30-93

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

(revised 1/1/91)

NAME OF COMMITTEE HealthCare COMPARE Corp. (Political Action Committee)

REPORT COVERING PERIOD FROM 1/1/97 TO 6/30/97

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	1000.00	1000.00	11(a)(i)
ii. Unitemized	--	--	11(a)(ii)
iii. Total (add i and ii) ➤	1000.00	1000.00	11(a)(iii)
b. Political Party Committees	--	--	11(b)
c. Other Political Committees (such as PACs)	--	--	11(c)
d. Total Contributions (add a iii, b and c) ➤	1000.00	1000.00	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) ➤	1000.00	1000.00	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	1000.00	1000.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)	--	--	21(a)(i)
i. Federal Share	--	--	21(a)(ii)
ii. Non-Federal Share	--	--	21(b)
b. Other Federal Operating Expenditures	--	--	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	--	--	22
22. Transfers to Affiliated/Other Party Committees	--	--	23
23. Contributions to Federal Candidates/Committees and Other Political Committees	41,347.85	41,347.85	24
24. Independent Expenditures (use Schedule E)	--	--	25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	--	--	26
26. Loan Repayments Made	--	--	27
27. Loans Made	--	--	28(a)
28. Refunds of Contributions To:	--	--	28(b)
a. Individuals/Persons Other Than Political Committees	--	--	28(c)
b. Political Party Committees	--	--	28(d)
c. Other Political Committees (such as PACs)	--	--	29
d. Total Contribution Refunds (add a, b and c) ➤	--	--	30
29. Other Disbursements	41,347.85	41,347.85	31
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	41,347.85	41,347.85	
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	1000.00	1000.00	32
33. Total Contribution Refunds (from line 28d)	--	--	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	1000.00	1000.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	--	--	35
36. Offsets to Operating Expenditures (from line 15)	--	--	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	--	--	37

FE6AH 5/95

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1

FOR LINE NUMBER

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)

HealthCare COMPARE Corp. (Political Action Committee)

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Gary B. Strong 2916 Weald Way #B24 Sacramento, CA 95833 Receipt For: [X] Primary [ ] General [ ] Other (specify):	Name of Employer: HealthCare COMPARE Corp. Occupation: Assistant Vice President Aggregate Year-to-Date > $ 1000.00	2/26/97	$1000.00
B. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
C. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
D. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
E. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional) $1000.00

TOTAL This Period (last page this line number only) $1000.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)
HealthCare COMPARE Corp. (Political Action Committee)

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for	Date (month, day, year)	Amount of Each Disbursement This Period
A. Cloverdale for Congress 3091 Maple Drive, Suite 200 Atlanta, GA 30305	Contribution [X] Primary [ ] General [ ] Other (specify)	2/24/97	$1000.00
B. Jeffords for Vermont P.O. Box 246 Montpelier, VT 05602	Contribution [X] Primary [ ] General [ ] Other (specify)	2/24/97	$1000.00
C. Becerra for Congress P.O. Box 75214 Washington, DC 20013-5214	Contribution [X] Primary [ ] General [ ] Other (specify)	2/24/97	$500.00
D. New Republican Majority Fund 228 South Washington St., Suite 200 Alexandria, VA 22314	Contribution [X] Primary [ ] General [ ] Other (specify)	2/24/97	$1000.00
E. John Breaux Senate Committee 110-B East Broad Street Falls Church, VA 22046	Contribution [X] Primary [ ] General [ ] Other (specify)	2/24/97	$1000.00
F. Nussle for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Contribution [X] Primary [ ] General [ ] Other (specify)	2/24/97	$500.00
G. Friends of Bob Livingston 901 15th Street, NW, Suite 700 Washington, DC 20005	Contribution [X] Primary [ ] General [ ] Other (specify)	2/24/97	$1000.00
H. DCCC 430 South Capitol Street Washington, DC 20003	Contribution [X] Primary [ ] General [ ] Other (specify)	2/24/97	$10,000.00
I. Gerald C "Jerry" Weller for Congress P.O. Box 687 Morris, IL 60540	Contribution [X] Primary [ ] General [ ] Other (specify)	5/5/97	$1000.00

SUBTOTAL of Disbursements This Page (optional) $17,000.00

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 3

FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

HealthCare COMPARE Corp. (Political Action Committee)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Senator Nickles P.O. Box 21033 Alexandria, VA 22320-2033	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$2000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Barbara Boxer P.O. Box 641751 Los Angeles, CA 90064	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$3000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom DeLay Congressional Committee 10707 Corporate Drive, Suite 130 Stafford, TX 77477	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$1000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Boucher for Congress P.O. Box 17306 Arlington, VA 22216	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$500.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Barbara Kennelly for Congress P.O. Box 3719, Central Station Hartford, CT 06103	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$500.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Thomas Campaign Committee Box 395 Bekersfield, CA 93302	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$1500.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Pete Stark Re-Election Committee P.O. Box 75214 Washington, DC 20013-5214	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$1000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Dan Burton for Congress Committee 4451 Brookfield Corporate Dr., Suite 200 Chantilly, VA 20151-1652	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$1000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Freedom Project 111 C Street, SE, Lower Level Washington, DC 20003	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/5/97	$1847.85

SUBTOTAL of Disbursements This Page (optional) $12,347.85

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

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

HealthCare COMPARE Corp. (Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John Ensign for Congress P.O. Box 98407 Las Vegas, NV 89139	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/29/97	$1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The Dick Armey Campaign P.O. Box 65 Lewisville, TX 75067	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/29/97	$2000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Congressman Bart Gordon Committee 4491 MacArthury Boulevard, NW, Suite 201 Washington, DC 20007	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/29/97	$500.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Democratic Senatorial Campaign Committee 430 South Capitol Street, SE Washington, DC 20003	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/29/97	$5000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rangel for 106th Congress Committee P.O. Box 5577 Manhattenville Station, 365 W. 125th St. New York, NY 10027	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/29/97	$1000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
John D. Dingell for Congress Committee P.O. Box 75214 Washington, DC 20013-5214	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/29/97	$1000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
David Price for Congress P.O. Box 2884 Washington, DC 20013	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/29/97	$500.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Fazio for Congress P.O. Box 2884 Washington, DC 20013	Contribution Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/29/97	$1000.00
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional) $12,000.00

TOTAL This Period (last page this line number only) $41,347.85

FE8AN126

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 7/2/97
☐	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):	POSTMARKED and/or DATE OF RECEIPT

MO
PREPARER

7/3/97
DATE PREPARED

REC FORM 70-2 (12/92)