

RECEIVED
FEDERAL ELECTION COMMISSION
MAIL ROOM
BELL, MCANDREWS & HILTACHK
ATTORNEYS AND COUNSELORS AT LAW
485 CAPITOL MALL, SUITE 501
SACRAMENTO, CALIFORNIA 95814

CHARLES H. BELL, JR.
COLLEEN C. MCANDREWS
THOMAS W. HILTACHK

(916) 442-7757
FAX (916) 442-7759

144 FOURTH STREET
SANTA MONICA, CA 90401
(310) 458-1405

July 15, 1996

Public Records Office
Federal Election Commission
999 E Street, NW
Washington, D.C. 20463

Dear Filing Officer:

Please find enclosed for filing the original and two copies
of:

Form 1 _____

Form 2 _____

Form 3 _____

Form 3X X

for Foundation Health Corporation PAC for the period of April 1,
1996, through June 30, 1996.

Please return an endorsed filed copy in the enclosed self
addressed envelope for our records.

Very truly yours,


Thomas W. Hiltachk

cc: California Secretary of State

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JUL 17 11 49 AM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (In full)
FOUNDATION HEALTH CORPORATION PAC

ADDRESS (number and street) Check if different than previously reported
3400 DATA DRIVE

CITY, STATE and ZIP CODE
RANCHO CORDOVA, CA 95670

2. FEC IDENTIFICATION NUMBER
C 00230783

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:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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

| 5. Covering Period | COLUMN A | COLUMN B |
|---|--------------|-----------------------|
| 04/01/96 through 06/30/96 | This Period | Calendar Year-to-Date |
| 6. (a) Cash on Hand January 1, 1996 | | \$ 74,056.34 |
| (b) Cash on Hand at Beginning of Reporting Period | \$ 85,331.04 | |
| (c) Total Receipts (from line 19) | \$ 11,297.72 | \$ 28,694.71 |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | \$ 96,628.76 | \$ 102,751.05 |
| 7. Total Disbursements (from Line 20) | \$ 8,087.62 | \$ 14,209.91 |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | \$ 88,541.14 | \$ 88,541.14 |
| 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- | |

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
THOMAS W. HILTSCHER AGENT/ATTORNEY FOR FILER

Signature of Treasurer

Date
7/15/96

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 6/93)

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

(revised 1/1/91)

| NAME OF COMMITTEE FOUNDATION HEALTH CORPORATION PAC | | REPORT COVERING PERIOD | |
|--|--|-------------------------------|---------------------------|
| | | FROM: 04/01/96 | TO: 06/30/96 |
| | | COLUMN A Total This Period | COLUMN B Calendar Year |
| I. Receipts | | | |
| 11. Contributions (other than loans) From: | | | |
| a. Individuals/Persons Other Than Political Committees | | | |
| i. Itemized (use Schedule A) | | 8,889.79 | 16,345.09 |
| ii. Unitemized | | 1,802.15 | 6,211.96 |
| iii. Total | (add i and ii) | 10,691.94 | 22,557.05 |
| b. Political Party Committees | | -0- | -0- |
| c. Other Political Committees (such as PACs) | | -0- | -0- |
| d. Total Contributions | (add a ii, b and c) | 10,691.94 | 22,557.05 |
| 12. Transfers From Affiliated/Other Party Committees | | -0- | -0- |
| 13. All Loans Received | | -0- | -0- |
| 14. Loan Repayments Received | | -0- | -0- |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) | | -0- | -0- |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees | | -0- | 5,000.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | | 605.78 | 1,137.66 |
| 18. Transfers from Nonfederal Account for Joint Activity | | -0- | -0- |
| 19. Total Receipts | (add 11d, 12, 13, 14, 15, 16, 17, and 18) | 11,297.72 | 28,694.71 |
| 20. Total Federal Receipts | (subtract line 18 from line 19) | 11,297.72 | 28,694.71 |
| II. Disbursements | | | |
| 21. Operating Expenditures: | | | |
| a. Shared Federal/Non-Federal Activity (from Schedule H4) | | | |
| i. Federal Share | | -0- | -0- |
| ii. Non-Federal Share | | -0- | -0- |
| b. Other Federal Operating Expenditures | | -0- | -0- |
| c. Total Operating Expenditures | (Add a i, ii, and b) | -0- | -0- |
| 22. Transfers to Affiliated/Other Party Committees | | -0- | -0- |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | | 8,000.00 | 14,000.00 |
| 24. Independent Expenditures (use Schedule E) | | -0- | -0- |
| 25. Coordinated Expenditures Made by Party Committees (2.U.S.C 441a(d)) (use Schedule F) | | -0- | -0- |
| 26. Loan Repayments Made | | -0- | -0- |
| 27. Loans Made | | -0- | -0- |
| 28. Refunds of Contributions To: | | | |
| a. Individuals/Persons Other Than Political Committees | | -0- | -0- |
| b. Political Party Committees | | -0- | -0- |
| c. Other Political Committees (such as PACs) | | -0- | -0- |
| d. Total Contribution Refunds | (Add a, b and c) | -0- | -0- |
| 29. Other Disbursements STATE TAXES | | 87.62 | 209.91 |
| 30. Total Disbursements | (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) | 8,087.62 | 14,209.91 |
| 31. Total Federal Disbursements | (subtract line 21 a ii from line 30) | 8,087.62 | 14,209.91 |
| III. Net Contributions/Operating Expenditures | | | |
| 32. Total Contributions (other than loans)(from line 11d) | | 10,691.94 | 22,557.05 |
| 33. Total Contribution Refunds (from line 28d) | | -0- | -0- |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | | 10,691.94 | 22,557.05 |
| 35. Total Federal Operating Expenditures | (add 21 a i and 21 b) | -0- | -0- |
| 36. Offsets to Operating Expenditures (from line 15) | | -0- | -0- |
| 37. Net Operating Expenditures | (subtract line 36 from 35) | -0- | -0- |

SCHEDULE A

ITEMIZED RECEIPTS

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 CORPORATION PAC

FEC ID No. C 00230789

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|------------------------------------|---------------------------------------|------------------------------------|
| Kirk Benson 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 250.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation Pres.VP Special SVC. | Aggregate Year-To-Date \$ 800.00 | 50.00/PERIOD |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Daniel Crowley 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BY-WEEKLY PAYROLL DEDUCTION | 500.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation Chairman & CEO | Aggregate Year-To-Date \$ 1,380.00 | 100.00/PERIOD |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Henry Loubet 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 200.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation Pres. Cal HQ | Aggregate Year-To-Date \$ 760.00 | 40.00/PERIOD |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Edward Munno 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 500.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation VP SALES & MARKETING | Aggregate Year-To-Date \$ 1,500.00 | 100/PERIOD |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Glenn Randolph 655 North Alvernon Tucson, AZ 85711 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 336.70 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation CEO Med Center | Aggregate Year-To-Date \$ 673.40 | 48.10/PERIOD |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Cynthia Suzuki 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 250.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation VP State/Local Govt. | Aggregate Year-To-Date \$ 950.00 | 50.00/PERIOD |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| Steve Tough 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 500.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation Pres. & CO Officer | Aggregate Year-To-Date \$ 1,900.00 | 100/PERIOD |

SUBTOTAL of Receipts This Page (optional) 2,536.70

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
 FOUNDATION HEALTH CORPORATION PAC

FEC ID No. C 00230789

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-----------------------------|------------------------------------|
| Charles Upton 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 350.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: VP FMS Aggregate Year-To-Date: \$ 700.00 | | 50.00/PERIOD |
| Owen Brant 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 80.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: SR VP INFO SERVICES Aggregate Year-To-Date: \$ 280.00 | | 40.00/PERIOD |
| Jeffrey Elder 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 74.50 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: SR VP FINANCE & CF Aggregate Year-To-Date: \$ 283.10 | | 14.90/PERIOD |
| Scott Kelly 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 175.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: VP & CD OFFICER Aggregate Year-To-Date: \$ 450.00 | | 25.00/PERIOD |
| Danny Smithson 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 250.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: SR VP Human Resource Aggregate Year-To-Date: \$ 950.00 | | 50.00/PERIOD |
| James Woye 3400 Data Drive Rancho Cordova, CA 95670 | Foundation Health Corporation | BI-WEEKLY PAYROLL DEDUCTION | 175.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: VP GOVT ACCOUNTING Aggregate Year-To-Date: \$ 400.00 | | 25.00/PERIOD |
| | | | |
| | | | |

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| SUBTOTAL of Receipts This Page (optional) | 1,104.50 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
FOUNDATION HEALTH CORPORATION PAC

FEC ID No. C 00230789

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|--|-------------------------------------|------------------------------------|
| SAM PATTERSON 7950 NW 53RD STREET MIAMI, FL 33166 | FOUNDATION HEALTH, & SOUTH FLORIDA HEALTH PLAN | 6/96 | 500.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation VICE PRESIDENT / CMO | Aggregate Year-To-Date \$ 500.00 | |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JEFFREY BAIRSTON 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 350.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation PRES. OF OCC. HEALTH | Aggregate Year-To-Date \$ 430.00 | 50.00/PERIOD |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| BRUCE BALHA 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 245.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation VP OF UNDERWRITING | Aggregate Year-To-Date \$ 350.00 | 35.00/PERIOD |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| MARSHALL BENTLEY 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 175.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation VP & COUNSEL | Aggregate Year-To-Date \$ 350.00 | 25.00/PERIOD |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| DANIELA CALVITTI 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 175.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation VP TREASURER CALCO | Aggregate Year-To-Date \$ 306.00 | 25.00/PERIOD |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| JAMES COLE 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 107.80 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation DIR. TRANSPORTATION | Aggregate Year-To-Date \$ 215.60 | 15.40/PERIOD |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
| RANDALL FRANKS 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 105.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation VP FHFA | Aggregate Year-To-Date \$ 270.00 | 15.00/PERIOD |

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| SUBTOTAL of Receipts This Page (optional) | 1,657.80 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (in Full)
 FOUNDATION HEALTH CORPORATION PAC

FEC ID No. C 00230789

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-----------------------------|------------------------------------|
| GARRY GARRISON 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 175.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: SR. VP. MEDICARE Aggregate Year-To-Date: > \$ 350.00 | | 25.00/PERIOD |
| STEVEN HAVERSTOCK 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 245.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: DIR. COMPUTER SERV. Aggregate Year-To-Date: > \$ 350.00 | | 35.00/PERIOD |
| JENNIFER HELEN 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 97.58 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: DIR. CHAMPUS RESEARC Aggregate Year-To-Date: > \$ 223.04 | | 13.94/PERIOD |
| GERALD KERTSZ 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 336.70 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: VP MARKETING/SALES Aggregate Year-To-Date: > \$ 506.00 | | 48.10/PERIOD |
| DAVID LAMAR 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 350.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: VP SYSTEMS DEVELOPMT Aggregate Year-To-Date: > \$ 350.00 | | 50.00/PERIOD |
| GARY McHOLLAND 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 140.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify): | Occupation: VP ACTUARIAL Aggregate Year-To-Date: > \$ 280.00 | | 20.0/PERIOD |
| RONALD MILLS 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 140.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: DIR. SYSTEMS & PROG. Aggregate Year-To-Date: > \$ 280.00 | | 20.00/PERIOD |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 1,484.28 |
| 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 5 OF 6
FOR LINE NUMBER 11A1

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NAME OF COMMITTEE (in Full)
FOUNDATION HEALTH CORPORATION PAC

FEC ID No. C 00230789

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|--|---|-----------------------------|------------------------------------|
| MARGUERITE O'TOOLE 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 336.70 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: SR VP MEDICARE Aggregate Year-To-Date: 481.00 | | 48.10/PERIOD |
| TIMOTHY PETERSON 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 350.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: MGR DIR. FOR TRNG Aggregate Year-To-Date: 350.00 | | 50.00/PERIOD |
| JACK POWELL 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 175.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: SR. IVE. EMP. CALCOMP Aggregate Year-To-Date: 250.00 | | 25.00/PERIOD |
| JONATHAN SCHEFF 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 188.44 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: VP HEALTHCARE SERV. Aggregate Year-To-Date: 376.88 | | 26.92/PERIOD |
| GAIL SCHUBERT 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 175.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: VE LAW DEPT. Aggregate Year-To-Date: 350.00 | | 25.00/PERIOD |
| DENISE SHULL 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 228.20 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: VP & CO OFFICER Aggregate Year-To-Date: 380.80 | | 32.60/PERIOD |
| FREDERICK SIMMONS 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 | FOUNDATION HEALTH CORPORATION | BI-WEEKLY PAYROLL DEDUCTION | 132.00 |
| Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | Occupation: VP STRATEGIC BUS. Aggregate Year-To-Date: 224.00 | | 16.00/PERIOD |

SUBTOTAL of Receipts This Page (optional) 1,555.34

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)
FOUNDATION HEALTH CORPORATION PAC

FEC ID No. **C 00230789**

| A. Full Name, Mailing Address and ZIP Code | Name of Employer | Date (month, day, year) | Amount of Each Receipt this Period |
|---|--|---|------------------------------------|
| EMMETT SMITH 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | FOUNDATION HEALTH CORPORATION Occupation MEDICAL DIRECTOR Aggregate Total \geq \$ 276.96 | BI-WEEKLY PAYROLL DEDUCTION 17.31/PERIOD | 121.17 |
| | WAYNE VARCO 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | | |
| WALTER NES WELLER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | FOUNDATION HEALTH CORPORATION Occupation DIR. GOVT. PROPOSALS Aggregate Total \geq \$ 320.00 | BI-WEEKLY PAYROLL DEDUCTION 20.00/PERIOD | 140.00 |
| | DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | | |
| DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | FOUNDATION HEALTH CORPORATION Occupation VP COMMERCIAL ADMIN. Aggregate Total \geq \$ 210.00 | BI-WEEKLY PAYROLL DEDUCTION 15.00/PERIOD | 105.00 |
| | DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | | |
| DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | FOUNDATION HEALTH CORPORATION Occupation VP OF PDTH HEALTH SF Aggregate Total \geq \$ 300.00 | BI-WEEKLY PAYROLL DEDUCTION 25.00/PERIOD | 175.00 |
| | DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | | |
| DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | FOUNDATION HEALTH CORPORATION Occupation VP OF PDTH HEALTH SF Aggregate Total \geq \$ 300.00 | BI-WEEKLY PAYROLL DEDUCTION 25.00/PERIOD | 175.00 |
| | DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | | |
| DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | FOUNDATION HEALTH CORPORATION Occupation VP OF PDTH HEALTH SF Aggregate Total \geq \$ 300.00 | BI-WEEKLY PAYROLL DEDUCTION 25.00/PERIOD | 175.00 |
| | DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | | |
| DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | FOUNDATION HEALTH CORPORATION Occupation VP OF PDTH HEALTH SF Aggregate Total \geq \$ 300.00 | BI-WEEKLY PAYROLL DEDUCTION 25.00/PERIOD | 175.00 |
| | DAVID WESTER 3400 DATA DRIVE RANCHO CORDOVA, CA 95670 Receipt for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify): | | |

| | |
|--|----------|
| SUBTOTAL of Receipts This Page (optional) | 541.17 |
| TOTAL This Period (last page this line number only) | 8,889.79 |

SCHEDULE B

ITEMIZED DISBURSEMENTS

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 CORPORATION PAC

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 |
|--|--|-------------------------|---|
| PETE WILSON FOR PRESIDENT AUDIT FINES & PENALTIES C/O ERLAN KRAFT 16 YELLOWOOD WAY, IRVINE, CA | CONTRIBUTION-PRESIDENT Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) . AUDIT | 04/16/96 | 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) | 05/02/96 | 500.00 |
| C. 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 |
| D. Full Name, Mailing Address and ZIP Code NORM DICKS FOR CONGRESS COMMITTEE 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) | 05/02/96 | 500.00 |
| E. Full Name, Mailing Address and ZIP Code CONGRESSMAN BOB MATSUI FUND FOR DEMOCRATIC LEADERSH P. O. BOX 1347 SACRAMENTO, CA 95812 | CONTRIBUTION CA CD-5 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) | 06/12/96 | 2,000.00 |
| 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) | 8,000.00 |
| TOTAL This Period (last page this line number only) | 8,000.00 |

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.

| | |
|--|-----------------------------------|
| <input checked="" type="checkbox"/> Hand Delivered | DATE OF RECEIPT <i>7-17-96</i> |
| <input type="checkbox"/> First Class Mail | POSTMARKED |
| <input type="checkbox"/> Registered/Certified Mail | POSTMARKED |
| <input type="checkbox"/> No Postmark | |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> Received from the House Office of Records and Registration | DATE OF RECEIPT |
| <input type="checkbox"/> Received from the Senate Office of Public Records | DATE OF RECEIPT |
| <input type="checkbox"/> Other (Specify): | POSTMARKED |
| | and/or DATE OF RECEIPT |
| <i>JEB</i> PREPARER | <i>7-17-96</i> DATE PREPARED |