REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUN 16 12 13 PM '97

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

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 5/1/97 through 5/31/97		
6. (a) Cash on Hand January 1, 19 97		$ -0-
(b) Cash on Hand at Beginning of Reporting Period	$ -0-	
(c) Total Receipts (from Line 19)	$ 4358.99	$ 4358.99
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 4358.99	$ 4358.99
7. Total Disbursements (from Line 30)	$ 3680.04	$ 3680.04
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 678.95	$ 678.95
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: David Bauer

Date: 6/2/97

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)

FL-HAND 35

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 5/1/97 TO: 5/31/97

	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)	2283.99	2283.99	11(a)(i)
ii. Unitemized	75.00	75.00	11(a)(ii)
iii. Total (add i and ii) ➤	2358.99	2358.99	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)	2000.00	2000.00	11(c)
d. Total Contributions (add a iii, b and c) ➤	4358.99	4358.99	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) ➤	4358.99	4358.99	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	4358.99	4358.99	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	3680.04	3680.04	21(c)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	3680.04	3680.04	22
22. Transfers to Affiliated/Other Party Committees			23
23. Contributions to Federal Candidates/Committees and Other Political Committees			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. Refunds of Contributions To:			28(a)
a. Individuals/Persons Other Than Political Committees			28(b)
b. Political Party Committees			28(c)
c. Other Political Committees (such as PACs)			28(d)
d. Total Contribution Refunds (add a, b and c) ➤			29
29. Other Disbursements			30
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	3680.04	3680.04	31
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	3680.04	3680.04	
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4358.99	4358.99	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4358.99	4358.99	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	3680.04	3680.04	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	3680.04	3680.04	37

FE6AN135

Use seperate schedule(s) for each category of the Detailed Summary Page	Page 1 OF
	FOR LINE NUMBER 11(a)(i)

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)

CAT PAC

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
BLANK JONATHAN 1315 WOODSIDE PKY. Silver Spring MD 20910	AKIN, GUMP, STRAUSS Occupation: LOBBYIST	5/28/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 500.00		
FINDARO JR. JOSEPH T. 8951 MILLER LN. Vienna VA 22182	MCCLURE, GERARD & NAVER Occupation: ASSOCIATE	5/28/97	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 250.00		
JOHN T. DOOLITTLE FOR CONGRESS 11854 PROSPECT HILL Rancho Cordova CA 95670	ID. #C00242788 Occupation: CANDIDATE COMMITTEE	5/20/97	533.99
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 533.99		
SCHOONMAKER JAN 147 E ST., SE Washington DC 20003	VAN SCOYOC ASSOC. Occupation: ASSOCIATE	5/28/97	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 250.00		
SKLADANY JR. BARNEY J. 307 MANSION DR. Alexandria VA 22302	AKIN, GUMP, STRAUSS Occupation: ATTORNEY	5/28/97	250.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 250.00		
TEXANS FOR HENRY BONILLA 19326 BOCA DEL MAR San Antonio TX 78258	Name of Employer Occupation: CANDIDATE COMMITTEE	5/28/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	AggregateYear-to-date $ 500.00		

SUBTOTAL of Receipts This Page (optional) 2,283.99

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 11ai

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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) 2283.99

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

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 / Occupation	Date (month day, year)	Amount of Each Receipt this Period
AMERICAN AIRLINES PAC 1101 17TH ST. NW #600 Washington DC 20036	FEDERAL PAC	5/28/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-date $ 500.00		
AMERICAN MARITIME OFFICERS VOLUNTARY 650 4TH AVE. Brooklyn NY 11232	FEDERAL PAC	5/28/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-date $ 500.00		
ICE CREAM, MILK & CHEESE PAC 1250 H ST., NW, #900 Washington DC 20005	FEDERAL PAC	5/28/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-date $ 500.00		
THE RIGHT TO WORK PAC 5240 PORT ROYAL RD. 211 Springfield VA 22151	Name of Employer ID. #C00164392 Occupation FEDERAL PAC	5/28/97	500.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Aggregate Year-to-date $ 500.00		

SUBTOTAL of Receipts This Page (optional) 2,000.00

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 / 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) 2000.00

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)

CAT PAC

A. 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
Capitol Hill Club 300 1st St., S.E. Washington DC 20003	fundraising event X fundraising	5/29/97	1840.08
B. 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**
Kathy Lopez 11954 Prospect Hill Gold River CA 95670	printing X fundraising	5/29/97	1174.95
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**
John T. Doolittle for Congress 11954 Prospect Hill Gold River CA 95670	in-kind of printing see Sch. A 11a1	5/20/97	533.99
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)	
TOTAL This Period (last page this line number only)	35490.02

FE6AN135

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
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☑	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

J.A.O.	6/16/97
PREPARER	DATE PREPARED

FEC FORM 70-2 (12/92)