



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

FEB 3 1999

Callen Lockett, Treasurer
Wellpoint Health Networks "WELLPAC"
21555 Oxnard Street
Woodland Hills, CA 91367

Identification Number: C00197228

Reference: Amended May Monthly Report (4/1/98-4/30/98) received 12/7/98,
Amended October Monthly Report (9/1/98-9/30/98) received 12/7/98 and
Amended 12 Day Pre-General Report (10/1/98-10/14/98) received 12/7/98

Dear Mr. Lockett:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B supporting Line 23 of your report discloses a contribution(s) to a candidate(s) for the 1998 primary election; however, the funds were disbursed after the election date(s) (pertinent portion(s) attached). Please note that contributions may not be designated for an election which has already occurred unless the funds are to be used to reduce a candidate committee's debts incurred during that election campaign. Please clarify the contribution(s) and disclose any redesignations or refunds as necessary on the appropriate schedules.

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530. My local number is (202) 694-1130.

Sincerely,

Antoinette Kitchen
Reports Analyst
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary PagePAGE 1 OF 1
FOR LINE NUMBER
23

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 "WELLPAK"

AK

A. Full Name, Mailing Address and ZIP Code
HASTERT FOR CONGRESS
8344 CAVALIER CORRIDOR
FALLS CHURCH, VA 22044Purpose of Disbursement
Dennis Hastert, U.S.
HOUSE 14th ILDate (month,
day, year)
04/14/98Amount of Each
Disbursement This Period
1,000.00Disbursement for: ☒ Primary ☐ General
☐ Other (specify) 1998 IL 10 WAS 3-17-98B. Full Name, Mailing Address and ZIP Code
BLUE CROSS BLUE SHIELD
ASSOCIATION
1310 G. Street
N.W. 12th Floor
Washington, DC 20005

Purpose of Disbursement

Date (month,
day, year)
04/14/98Amount of Each
Disbursement This Period
5,000.00Disbursement for: ☐ Primary ☐ General
☒ Other (specify) Office Holder AccountC. Full Name, Mailing Address and ZIP Code
COVERDELL GOOD GOVERNMENT COMM
3091 MAPLE DRIVE
SUITE 200
ATLANTA, GAPurpose of Disbursement
Paul Coverdell, U.S.
SENATE GADate (month,
day, year)
04/30/98Amount of Each
Disbursement This Period
2,000.00Disbursement for: ☐ Primary ☒ General
☐ Other (specify) 1998D. Full Name, Mailing Address and ZIP Code
HERGER FOR CONGRESS
P.O. BOX 40175
WASHINGTON, DC 20018Purpose of Disbursement
Wally Herger, U.S.
HOUSE 2nd CADate (month,
day, year)
04/30/98Amount of Each
Disbursement This Period
1,000.00Disbursement for: ☒ Primary ☐ General
☐ Other (specify) 1998E. Full Name, Mailing Address and ZIP Code
BUCK MCKEON FOR CONGRESS
P.O. BOX 2071
SANTA CLARITA, CA 91386Purpose of Disbursement
Howard P. Buck
McKeon, U.S. HOUSEDate (month,
day, year)
04/30/98Amount of Each
Disbursement This Period
500.00Disbursement for: ☒ Primary ☐ General
☐ Other (specify) 1998F. Full Name, Mailing Address and ZIP Code
VOINOVICH FOR US SENATE
8 EAST BROAD ST.
8TH FLOOR
COLUMBUS, OH 43215Purpose of Disbursement
George Voinovich, U.S.
SENATE OHDate (month,
day, year)
04/30/98Amount of Each
Disbursement This Period
1,000.00Disbursement for: ☐ Primary ☒ General
☐ Other (specify) 1998

G. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☐ General
☐ Other (specify)

H. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☐ General
☐ Other (specify)

I. Full Name, Mailing Address and ZIP Code

Purpose of Disbursement

Date (month,
day, year)Amount of Each
Disbursement This PeriodDisbursement for: ☐ Primary ☐ General
☐ Other (specify)

SUBTOTAL of Disbursements This Page (optional)

10,500.00

TOTAL This Period (test page this line number only)

10,500.00

