

**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 03/01/2000 TO: 03/31/2000	
I. Receipts		COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	7823.20	11554.80	11.a.i.
ii. Unitemized	6033.31	19725.45	11.a.ii.
iii. Total	13856.51	31280.25	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	13856.51	31280.25	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 ..	2000.00	2000.00	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	15856.51	33280.25	19.
20. Total Federal Receipts	15856.51	33280.25	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	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	28000.00	40000.00	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 Sch. 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 Contributions Refunds	0.00	0.00	28.d.
29. Other Disbursements	200.00	5200.00	29.
30. Total Disbursements	28200.00	45200.00	30.
31. Total Federal Disbursements	28200.00	45200.00	31.
III. Net Contributions / Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	13856.51	31280.25	32.
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33.
34. Net Contributions (other than loans) (subtract line 33 from 32)	13856.51	31280.25	34.
35. Total Federal Operating Expenditures	0.00	0.00	35.
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36.
37. Net Operating Expenditures	0.00	0.00	37.

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	3 / 12
			FOR LINE NUMBER 11a

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 Dr. Dee Fitzgerald 24781 Glenwood Drive El Toro CA 92630	Name of Employer WellPoint Health Networks	Date (month, day, year) 03/01/2000	Amount of Each Receipt this Period 700.00
	Occupation Staff VP, Dental Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 700.00		
Full Name, Mailing Address, and ZIP Code Marc Bilodeau 9810 Loblolly Lane Roswell GA 30075	Name of Employer UNICARE LIFE & HEALTH INS. CO.	Date (month, day, year) Payroll Deduction (\$30.00 Bi-weekly)	Amount of Each Receipt this Period 50.00
	Occupation General Mgr		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 210.00		
Full Name, Mailing Address, and ZIP Code John Cypul 1629 Castlehill Court Westlake Village CA 91361	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$35.00 Bi-weekly)	Amount of Each Receipt this Period 105.00
	Occupation VP, Investor Rels/Corp Comm		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 245.00		
Full Name, Mailing Address, and ZIP Code David Colby 200 West Stafford Road Lake Sherwood CA 91361	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$192.30 Bi-weekly)	Amount of Each Receipt this Period 576.90
	Occupation EVP, Chief Financial Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 1346.10		
Full Name, Mailing Address, and ZIP Code Joan Herman 23224 Park Corniche Calabasas CA 91302	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$70.00 Bi-weekly)	Amount of Each Receipt this Period 210.00
	Occupation Group Pres, Sr/Spec Bus Div		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 490.00		
Full Name, Mailing Address, and ZIP Code Alice Rosenblatt 5948 Annie Oakley Road Hidden Hills CA 91302	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$40.00 Bi-weekly)	Amount of Each Receipt this Period 120.00
	Occupation SVP, Merger/Acq Integration		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 280.00		
Full Name, Mailing Address, and ZIP Code Lana Volpe 5448 Forestbridge Drive Agoura Hills CA 91301	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$30.00 Bi-weekly)	Amount of Each Receipt this Period 80.00
	Occupation VP, Strategic Initiatives		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > \$ 210.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	4 / 12
			FOR LINE NUMBER 11a

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 Vincent Mace 9 Greenmeadow Drive Thousand Oaks CA 91320 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$50.00 Bi-weekly)	Amount of Each Receipt this Period 150.00
	Occupation VP, Actuarial		
	Aggregate Year-to-Date > \$ 350.00		
Full Name, Mailing Address, and ZIP Code Lorraine Salvatore 3764 Calle Posadas Newbury Park CA 91320 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$30.00 Bi-weekly)	Amount of Each Receipt this Period 50.00
	Occupation Blue Cross of California		
	Aggregate Year-to-Date > \$ 210.00		
Full Name, Mailing Address, and ZIP Code MB Cheryl Noncarrow 2712 Arnoldson Avenue San Diego CA 92122 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UNICARE LIFE & HEALTH INS. CO.	Date (month, day, year) Payroll Deduction (\$40.00 Bi-weekly)	Amount of Each Receipt this Period 120.00
	Occupation General Manager		
	Aggregate Year-to-Date > \$ 280.00		
Full Name, Mailing Address, and ZIP Code Frederick Raach 4342 Redwood Ave #308C Marina Del Rey CA 90292 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$30.00 Bi-weekly)	Amount of Each Receipt this Period 50.00
	Occupation General Manager		
	Aggregate Year-to-Date > \$ 210.00		
Full Name, Mailing Address, and ZIP Code Rebecca Kapustay 3094 Bayshore Avenue Ventura CA 93001 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$48.00 Bi-weekly)	Amount of Each Receipt this Period 144.00
	Occupation SVP, Commercial Accounts		
	Aggregate Year-to-Date > \$ 336.00		
Full Name, Mailing Address, and ZIP Code Clifton Gaus 3958 Oak Hollow Circle Thousand Oaks CA 91320 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$198.00 Bi-weekly)	Amount of Each Receipt this Period 588.00
	Occupation EVP, Chief Administrative Ofcr		
	Aggregate Year-to-Date > \$ 1372.00		
Full Name, Mailing Address, and ZIP Code Andrew Morrison 355 Medea Creek Lane Oak Park CA 91377 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$40.00 Bi-weekly)	Amount of Each Receipt this Period 120.00
	Occupation VP, Federal Gov't Affairs		
	Aggregate Year-to-Date > \$ 280.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	5 / 12
				FOR LINE NUMBER	11a
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 Marshall Jones 29508 Ridgeway Drive Agoura Hills CA 91301 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation SVP, Chief Information Officer Aggregate Year-to-Date > \$ 350.00	Date (month, day, year) Payroll Deduction (\$50.00 Bi-weekly)	Amount of Each Receipt this Period 150.00		
Full Name, Mailing Address, and ZIP Code Ivan Kamil 2610 Forrester Drive Los Angeles CA 90034 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation VP, Medical Director Aggregate Year-to-Date > \$ 203.00	Date (month, day, year) Payroll Deduction (\$29.00 Bi-weekly)	Amount of Each Receipt this Period 87.00		
Full Name, Mailing Address, and ZIP Code Greg Baird 25202 Bentwood Laguna Niguel CA 92677 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation SVP, National Sales/Sales Sup Aggregate Year-to-Date > \$ 280.00	Date (month, day, year) Payroll Deduction (\$40.00 Bi-weekly)	Amount of Each Receipt this Period 120.00		
Full Name, Mailing Address, and ZIP Code Michael Nameth 756 Cedar Point Place Westlake Village CA 91362 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer WELLPPOINT PHARMACY MGMT, INC. Occupation General Mgr Aggregate Year-to-Date > \$ 245.00	Date (month, day, year) Payroll Deduction (\$35.00 Bi-weekly)	Amount of Each Receipt this Period 105.00		
Full Name, Mailing Address, and ZIP Code Leonard Schaeffer One WellPoint Way Thousand Oaks CA 91320 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation Chairman and Chief Exec Ofcr Aggregate Year-to-Date > \$ 1346.10	Date (month, day, year) Payroll Deduction (\$192.30 Bi-weekly)	Amount of Each Receipt this Period 576.90		
Full Name, Mailing Address, and ZIP Code John Volkober 525 Winncastle Street Simi Valley CA 93065 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation VP, CFO-Health Mgmt/CAO Aggregate Year-to-Date > \$ 266.00	Date (month, day, year) Payroll Deduction (\$38.00 Bi-weekly)	Amount of Each Receipt this Period 114.00		
Full Name, Mailing Address, and ZIP Code David Helvig 188 Colt Lane Thousand Oaks CA 91361 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation SVP, Commercial Accounts Aggregate Year-to-Date > \$ 385.00	Date (month, day, year) Payroll Deduction (\$55.00 Bi-weekly)	Amount of Each Receipt this Period 165.00		
SUBTOTALS of Receipts This Page (Optional)					
TOTALS This Period (last page this line number only)					

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	6 / 12
			FOR LINE NUMBER 11a

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 Charles Curry 4551 Tam O'Shanter Drive Westlake Village CA 91362 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$29.00 Bi-weekly)	Amount of Each Receipt this Period 87.00
	Occupation VP, Marketing and Advertising		
	Aggregate Year-to-Date > \$ 203.00		
Full Name, Mailing Address, and ZIP Code R Kretschmer 952 - 2Nd Street Manhattan Beach CA 90266 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$29.00 Bi-weekly)	Amount of Each Receipt this Period 87.00
	Occupation VP, Treasury		
	Aggregate Year-to-Date > \$ 203.00		
Full Name, Mailing Address, and ZIP Code Scott Herick 1124 Greenacre Avenue Los Angeles CA 90046 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$29.00 Bi-weekly)	Amount of Each Receipt this Period 87.00
	Occupation VP, LG Sales Support		
	Aggregate Year-to-Date > \$ 203.00		
Full Name, Mailing Address, and ZIP Code David Ludwig 3094 Bayshore Avenue Ventura CA 93001 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UNICARE LIFE & HEALTH INS. CO.	Date (month, day, year) Payroll Deduction (\$45.00 Bi-weekly)	Amount of Each Receipt this Period 144.00
	Occupation SVP, Agency Management		
	Aggregate Year-to-Date > \$ 336.00		
Full Name, Mailing Address, and ZIP Code Max Brown 4514 Rayburn Westlake Village CA 91362 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UNICARE LIFE & HEALTH INS. CO.	Date (month, day, year) Payroll Deduction (\$30.00 Bi-weekly)	Amount of Each Receipt this Period 90.00
	Occupation SVP, Network Management		
	Aggregate Year-to-Date > \$ 210.00		
Full Name, Mailing Address, and ZIP Code Victor Diaz 10003 Lynbrook Dr Houston TX 77042 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UNICARE LIFE & HEALTH INS. CO.	Date (month, day, year) Payroll Deduction (\$45.00 Bi-weekly)	Amount of Each Receipt this Period 135.00
	Occupation VP, Medical Director		
	Aggregate Year-to-Date > \$ 315.00		
Full Name, Mailing Address, and ZIP Code Jim Loving 635 Fairview Avenue Sierra Madre CA 91024 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$29.00 Bi-weekly)	Amount of Each Receipt this Period 87.00
	Occupation VP, Sales Development-Sm Grp		
	Aggregate Year-to-Date > \$ 203.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	7 / 12 FOR LINE NUMBER 11a
-------------------	--------------------------	---	--

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 John Monahan 5373 Kerryhill Court Agoura Hills CA 91301 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation General Mgr Aggregate Year-to-Date > \$ 224.00	Date (month, day, year) Payroll Deduction (\$32.00 Bi-weekly)	Amount of Each Receipt this Period 95.00 Payroll Deduction (\$192.30 Bi-weekly)
Full Name, Mailing Address, and ZIP Code Dennis Weinberg 2510 Alhambra Court Camarillo CA 93012 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UNICARE LIFE & HEALTH INS. CO. Occupation Group Pres, Ind/Small Grp Div Aggregate Year-to-Date > \$ 1346.10	Date (month, day, year) Payroll Deduction (\$192.30 Bi-weekly)	Amount of Each Receipt this Period 576.50 Payroll Deduction (\$192.30 Bi-weekly)
Full Name, Mailing Address, and ZIP Code Richard Sellers 32362 Saddle Mountain Dr Westlake Village CA 91361 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation SVP, Branding/Market Research Aggregate Year-to-Date > \$ 420.00	Date (month, day, year) Payroll Deduction (\$90.00 Bi-weekly)	Amount of Each Receipt this Period 180.00 Payroll Deduction (\$90.00 Bi-weekly)
Full Name, Mailing Address, and ZIP Code John Siemon 10220 Principe Place Camarillo CA 93012 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation VP, Facilities Services Aggregate Year-to-Date > \$ 203.00	Date (month, day, year) Payroll Deduction (\$29.00 Bi-weekly)	Amount of Each Receipt this Period 87.00 Payroll Deduction (\$29.00 Bi-weekly)
Full Name, Mailing Address, and ZIP Code Ryan Trimble 27342 Lost Colt Drive Laguna Hills CA 92853 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UNICARE LIFE & HEALTH INS. CO. Occupation SVP, Medical Care Management Aggregate Year-to-Date > \$ 560.00	Date (month, day, year) Payroll Deduction (\$80.00 Bi-weekly)	Amount of Each Receipt this Period 240.00 Payroll Deduction (\$80.00 Bi-weekly)
Full Name, Mailing Address, and ZIP Code J Van Berkem 23477 Park Colombo Calabasas CA 91302 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA Occupation SVP, Human Resources Aggregate Year-to-Date > \$ 385.00	Date (month, day, year) Payroll Deduction (\$55.00 Bi-weekly)	Amount of Each Receipt this Period 185.00 Payroll Deduction (\$55.00 Bi-weekly)
Full Name, Mailing Address, and ZIP Code Kandy Waldie 220 Remington Boulevard Bolingbrook IL 60440 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UNICARE LIFE & HEALTH INS. CO. Occupation General Mgr Aggregate Year-to-Date > \$ 268.00	Date (month, day, year) Payroll Deduction (\$38.00 Bi-weekly)	Amount of Each Receipt this Period 114.00 Payroll Deduction (\$38.00 Bi-weekly)

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	8 / 12
			FOR LINE NUMBER 11a

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 Ronald Ragland 4941 Inadale Avenue Los Angeles CA 90043 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$38.00 Bi-weekly)	Amount of Each Receipt this Period 114.00
	Occupation VP, Sales Development-LGD		
	Aggregate Year-to-Date > \$ 298.00		
Full Name, Mailing Address, and ZIP Code Gene Householder 6016 Little Oak Lane Woodland Hills CA 91367 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$40.00 Bi-weekly)	Amount of Each Receipt this Period 120.00
	Occupation SVP. Public Entities		
	Aggregate Year-to-Date > \$ 290.00		
Full Name, Mailing Address, and ZIP Code Michael Higgins 28013 Ellis Court Santa Clarita CA 91350 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$35.00 Bi-weekly)	Amount of Each Receipt this Period 105.00
	Occupation General Mgr		
	Aggregate Year-to-Date > \$ 245.00		
Full Name, Mailing Address, and ZIP Code Brian Sassi 10148 Toluca Lake Ave. Toluca Lake CA 91602 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$35.00 Bi-weekly)	Amount of Each Receipt this Period 105.00
	Occupation General Mgr		
	Aggregate Year-to-Date > \$ 245.00		
Full Name, Mailing Address, and ZIP Code John Garner 10211 Valley Spring Ln Toluca Lake CA 91802 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$48.00 Bi-weekly)	Amount of Each Receipt this Period 144.00
	Occupation SVP. Public Affairs		
	Aggregate Year-to-Date > \$ 336.00		
Full Name, Mailing Address, and ZIP Code Jacqueline Anderson 5779 Willowtree Drive Agoura Hills CA 91301 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer UNICARE LIFE & HEALTH INS. CO.	Date (month, day, year) Payroll Deduction (\$40.00 Bi-weekly)	Amount of Each Receipt this Period 120.00
	Occupation VP. Strategic Projects		
	Aggregate Year-to-Date > \$ 280.00		
Full Name, Mailing Address, and ZIP Code Joseph Navarro 2000 Corporate Center Dr Newbury Park CA 91320 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Name of Employer BLUE CROSS OF CALIFORNIA	Date (month, day, year) Payroll Deduction (\$29.00 Bi-weekly)	Amount of Each Receipt this Period 87.00
	Occupation VP, Sales Services		
	Aggregate Year-to-Date > \$ 203.00		

SUBTOTALS of Receipts This Page (Optional)

TOTALS This Period (last page this line number only)

SCHEDULE A		ITEMIZED RECEIPTS		9 / 12
		Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER 11a
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 John Watts Jr 915 Hampton Bluff Drive Alpharetta GA 30004	Name of Employer UNICARE LIFE & HEALTH INS. CO. Occupation General Mgr	Date (month, day, year) Payroll Deduction (\$37.50 Bi-weekly)	Amount of Each Receipt this Period 112.50	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 5 262.50			
Full Name, Mailing Address, and ZIP Code Joyce Li 330 Anita Drive Pasadena CA 91105	Name of Employer BLUE CROSS OF CALIFORNIA Occupation SVP, Provider/Clinical Anal	Date (month, day, year) Payroll Deduction (\$30.00 Bi-weekly)	Amount of Each Receipt this Period 50.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 5 210.00			
Full Name, Mailing Address, and ZIP Code Robert Crocker 100 Planters Grove Brandon MS 39042	Name of Employer COST CARE INC. Occupation VP, Medical Director	Date (month, day, year) Payroll Deduction (\$46.00 Bi-weekly)	Amount of Each Receipt this Period 138.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) :	Aggregate Year-to-Date > 5 322.00			
SUBTOTALS of Receipts This Page (Optional)				
TOTALS This Period (last page this line number only)				7823.20

SCHEDULE A	ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	10 / 12
			FOR LINE NUMBER 16
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	Date (month, day, year) 03/28/2000	Amount of Each Receipt This Period 2000.00
	Occupation U.S. Senator		
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	Aggregate Year-to-Date > 5 2000.00		
SUBTOTALS of Receipts This Page (Optional)			
TOTALS This Period (last page this line number only)			2000.00

SCHEDULE B		ITEMIZED DISBURSEMENTS		Use separate schedule(s) for each category of the Detailed Summary Page	12 / 12
				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 WELLPAC					
Full Name, Mailing Address, and ZIP Code Friends of Glade Gorton 10806 SE 16th Street Bellevue WA 98004	Purpose of Disbursement Glade Gorton, U.S. SENATE WA (Senate - WA -) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	Date (month, day, year) 03/17/2000	Amount of Each Disbursement This Period 1000.00		
Full Name, Mailing Address, and ZIP Code Nelson for U.S. Senate 301 4th Street, NE Suite 201 Washington DC 20002	Purpose of Disbursement E Benjamin Nelson, U.S. SENATE NE (Senate - NE -) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	Date (month, day, year) 03/21/2000	Amount of Each Disbursement This Period 1000.00		
Full Name, Mailing Address, and ZIP Code Nelson for U.S. Senate 301 4th Street, NE Suite 201 Washington DC 20002	Purpose of Disbursement E Benjamin Nelson, U.S. SENATE NE (Senate - NE -) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	Date (month, day, year) 03/30/2000	Amount of Each Disbursement This Period 2000.00		
Full Name, Mailing Address, and ZIP Code Friends of Doc Hastings P.O. Box 2926 Pasco WA 99302	Purpose of Disbursement Richard 'Doc' Hastings, U.S. HOUSE 4th WA (House - WA - 4) Disbursement for: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : 2000	Date (month, day, year) 03/30/2000	Amount of Each Disbursement This Period 500.00		
SUBTOTALS of Disbursements This Page (Optional)					
TOTALS This Period (last page this line number only)					28000.00