

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

(Summary Page)

**HAND DELIVERED**

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

1. NAME OF COMMITTEE (In full) <b>Christopher Cox Congressional Committee</b>		2. FEC IDENTIFICATION NUMBER <b>DLI 29 6 22 PA '96</b> <b>C00223297</b>
ADDRESS (Number and street) <input type="checkbox"/> Check if different than previously reported <b>Post Office Box #088C</b>		
CITY, STATE and ZIP CODE <b>Newport Beach, CA 92658</b>	STATE/DISTRICT <b>CA/47th</b>	3. IS THIS REPORT AN AMENDMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO

4. TYPE OF REPORT

April 15 Quarterly Report  Twelfth day report preceding General  
(Type of Election)  
 July 15 Quarterly Report election on 11-5-96 In the State of California  
 October 15 Quarterly Report  Thirtieth day report following the General Election on \_\_\_\_\_  
In the State of \_\_\_\_\_  
 January 31 Year End Report  
 July 31 Mid-Year Report (Non-election Year Only)  Termination Report

This report contains activity for  Primary Election  General Election  Special Election  Runoff Election

SUMMARY

5. Covering Period	COLUMN A This Period	COLUMN B Calendar Year-to-Date
<u>10-1-96</u> through <u>10-16-96</u>		
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(a)) . . . . .	36672.41	326815.58
(b) Total Contribution Refunds (from Line 20(d)) . . . . .	-0-	-0-
(c) Net Contributions (other than loans) (subtract Line 6(b) from 6(a)) . . . . .	36672.41	326815.58
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17) . . . . .	25994.68	154460.99
(b) Total Offsets to Operating Expenditures (from Line 14) . . . . .	-0-	448.79
(c) Net Operating Expenditures (subtract Line 7(b) from 7(a)) . . . . .	25994.68	154012.20
8. Cash on Hand at Close of Reporting Period (from Line 27) . . . . .	684775.81	
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 20460  
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 W. Syme

Signature of Treasurer

*David W Syme*

Date

10-21-96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 437g.

**DETAILED SUMMARY PAGE  
of Receipts and Disbursements  
(Page 2, FEC FORM 3)**

Name of Committee (Full)	Report Covering the Period:		
	From: 10-1-96	To: 10-16-96	
Christopher Cox Congressional Committee	COLUMN A Total This Period	COLUMN B Calendar Year-To-Date	
<b>I. RECEIPTS</b>			
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>			
(a) Individuals/Persons Other Than Political Committees			
(1) Itemized (use Schedule A)	25848.64		11000
(2) Unitemized	2323.77		11000
(3) Total of contributions from individuals	28172.41	159690.90	11000
(b) Political Party Committees	-0-	-0-	1100
(c) Other Political Committees (such as PACs)	8500.00	168124.68	1100
(d) The Candidate			1160
(e) TOTAL CONTRIBUTIONS (other than loans) (add 11(a)(1), (2), (b) and (c))	36672.41	326815.58	1100
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES</b>	-0-	-0-	12
<b>13. LOANS:</b>			
(a) Made or Guaranteed by the Candidate	-0-	-0-	1300
(b) All Other Loans	-0-	-0-	1300
(c) TOTAL LOANS (add 13(a) and (b))	-0-	-0-	1300
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)</b>	-0-	448.79	14
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.)</b>	-0-	14655.44	15
<b>16. TOTAL RECEIPTS (add 11(e), 12, 13(c), 14 and 15)</b>	36672.41	341919.81	16
<b>II. DISBURSEMENTS</b>			
<b>17. OPERATING EXPENDITURES</b>	25994.68	154460.99	17
<b>18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES</b>	-0-	-0-	18
<b>19. LOAN REPAYMENTS:</b>			
(a) Of Loans Made or Guaranteed by the Candidate	-0-	-0-	1900
(b) Of All Other Loans	-0-	-0-	1900
(c) TOTAL LOAN REPAYMENTS (add 19(a) and (b))	-0-	-0-	1900
<b>20. REFUNDS OF CONTRIBUTIONS TO:</b>			
(a) Individuals/Persons Other than Political Committees	-0-	-0-	2000
(b) Political Party Committees	-0-	-0-	2000
(c) Other Political Committees (such as PACs)	-0-	-0-	2000
(d) TOTAL CONTRIBUTION REFUNDS (add 20(a), (b) and (c))	-0-	-0-	2000
<b>21. OTHER DISBURSEMENTS</b>	56250.00	86450.00	21
<b>22. TOTAL DISBURSEMENTS (add 17, 18, 19(c), 20(d) and 21)</b>	82244.68	240910.99	22
<b>III. CASH SUMMARY</b>			
<b>23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD</b>	\$	730348.08	23
<b>24. TOTAL RECEIPTS THIS PERIOD (from Line 16)</b>	\$	36672.41	24
<b>25. SUBTOTAL (add Line 23 and Line 24)</b>	\$	767020.49	25
<b>26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)</b>	\$	82244.68	26
<b>27. CASH ON HAND AT CLOSE OF THE REPORTING PERIOD (subtract Line 26 from 25)</b>	\$	684775.81	27

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 1 OF 11  
FOR LINE NO. 11a1

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NAME OF COMMITTEE (In Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Allen 1847 Port Abbey Place Newport Beach CA 92660-5311	N/A	10-7-96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 1000.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Philip E. Arnold 149 The Masters Circle Costa Mesa CA 92627-4640	N/A	10-7-96	100.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 300.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael L. Bagnell Post Office Box 901 Rancho Santa Fe CA 92067-0901	N/A	10-7-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 600.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
James E. Burgwin 1217 Emerald Bay Laguna Beach CA 92651-1262	JSV Partners	10-7-96	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 500.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Bertee 120 McKnight Laguna Beach CA 92651-1339	OrionAir, Inc.	10-16-96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive	Aggregate Year-to-Date > \$ 1000.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Raymond K. Brandt 4 Jade Cove Corona del Mar CA 92625-1012	Self Employed	10-16-96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 250.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Louise Brandt 4 Jade Cove Corona del Mar CA 92625-1012	Self Employed	10-16-96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Consultant	Aggregate Year-to-Date > \$ 250.00	

SUBTOTAL of Receipts This Page (optional)..... 3450.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223257

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
King Burstein 651 Bayside Drive Newport Beach CA 92660-7213	N/A	10-7-96	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	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
J. Michael Christiansen 2114 Farrell Avenue Redondo Beach CA 90278-1819	Self Employed	10-7-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Merchant Banker		
	Aggregate Year-to-Date > \$ 350.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William S. Graycraft 2632 Fresno Drive Mission Viejo CA 92691-1517	City of Mission Viejo	10-7-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Elected Official/Sales		
	Aggregate Year-to-Date > \$ 350.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Donald J. Crevier 3 Lagunita Laguna Beach CA 92651-4254	Crevier BMW	10-16-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer		
	Aggregate Year-to-Date > \$ 350.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert W. Crevier 2525 Ocean Boulevard #E6 Corona del Mar CA 92625-2829	Crevier BMW	10-16-96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Auto Dealer		
	Aggregate Year-to-Date > \$ 450.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Marion H. Devick 1808 Yrachinda Lane Newport Beach CA 92660-3829	N/A	10-16-96	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired		
	Aggregate Year-to-Date > \$ 250.00		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Chris P. DiIynas 2149 Mesa Drive Newport Beach CA 92660-1709	Pacific Investment Management Co	10-7-96	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Executive		
	Aggregate Year-to-Date > \$ 500.00		

SUBTOTAL of Receipts This Page (optional)..... 2450.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE 3 OF 13  
FOR LINE NO. 11a1

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NAME OF COMMITTEE (in full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

<p><b>A. Full Name, Mailing Address and ZIP Code</b> Richard C. Elliott 23 Harbor Island Newport Beach CA 92660-7201</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b> Beverly S. Elliott 23 Harbor Island Newport Beach, CA 92660-7201</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b> Fredric J. Forster 1221 Starboard Way Corona del Mar CA 92625-1321</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Consultant</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b> Ariva Forster 1221 Starboard Way Corona del Mar CA 92625-1321</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Education</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b> Lawrence E. Golub 1125 Park Avenue Apt. 7A New York NY 10128-1243</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Golub Associates</p> <p>Occupation Investment Banker</p> <p>Aggregate Year-to-Date &gt; \$ 350.00</p>	<p>Date (month, day, year) 10-16-96</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b> John C. Harrison 6635 Highlander Way Crozet VA 22932-9722</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer University of Virginia</p> <p>Occupation Law Professor</p> <p>Aggregate Year-to-Date &gt; \$ 350.00</p>	<p>Date (month, day, year) 10-16-96</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b> Byron Hoffman 6 Rue Villars Newport Beach CA 92660-5105</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Hoffman Company</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 250.00</p>

SUBTOTAL of Receipts This Page (optional)..... 1700.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules (a) for each category of the Detailed Summary Page

PAGE 4 OF 11  
FOR LINE NO. 11a1

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

<p><b>A. Full Name, Mailing Address and ZIP Code</b>                  Pamela Hoffman                  &amp; Rue Villars                  Newport Beach CA 92660-5103</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation Baker</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 250.00</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>                  R. Gilbert Jones                  818 Harbor Island Drive                  Newport Beach CA 92660-7228</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Self Employed</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 350.00</p>	<p>Date (month, day, year) 10-16-96</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>                  Peter Kremer                  Post Office Box 1828                  Sun Valley CA 93353-1828</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer The Kremer Company</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 500.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>                  Robert L. Leathers                  115 Milford Drive                  Corona del Mar CA 92625</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Cartwright Electronics</p> <p>Occupation Executive</p> <p>Aggregate Year-to-Date &gt; \$ 1000.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 1000.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>                  Steven Bruce Lehat                  26 Iron Work Way                  Irvine CA 92612-2107</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer Sheldon &amp; Nak</p> <p>Occupation Attorney</p> <p>Aggregate Year-to-Date &gt; \$ 350.00</p>	<p>Date (month, day, year) 10-7-96</p>	<p>Amount of Each Receipt this Period 350.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>                  John Harmorstone                  12 East Yale Loop                  Irvine CA 92604-3333</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date &gt; \$ 450.00</p>	<p>Date (month, day, year) 10-16-96</p>	<p>Amount of Each Receipt this Period 100.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>                  Harry T. Martindale                  1015 Granville Drive                  Newport Beach CA 92660-6205</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer N/A</p> <p>Occupation Retired</p> <p>Aggregate Year-to-Date &gt; \$ 300.00</p>	<p>Date (month, day, year) 10-16-96</p>	<p>Amount of Each Receipt this Period 100.00</p>

SUBTOTAL of Receipts This Page (optional) ..... 2650.00

TOTAL This Period (last page this line number only) .....

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Christopher Cox Congressional Committee

FEC ID No. C00233297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Marjorie Flinn Moore 1920 Haliotrope Drive Santa Ana CA 92706-2538  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Employed  Occupation Writer  Aggregate Year-to-Date > \$ 500.00	10-16-96	500.00
B. Full Name, Mailing Address and ZIP Code  Alexander S. Redos 900 Via Lido Road Newport Beach CA 92663-5527  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer The Redos Corporation  Occupation Executive  Aggregate Year-to-Date > \$ 350.00	10-16-96	350.00
C. Full Name, Mailing Address and ZIP Code  Jerome Raymond 120 Ridgewood Avenue Glen Ridge NJ 07028-1121  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Datamation Systems, Incorporated  Occupation Business  Aggregate Year-to-Date > \$ 350.00	10-7-96	350.00
D. Full Name, Mailing Address and ZIP Code  William B. Simon 61 Linda Isle Newport Beach CA 92660-7207  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer William B. Simon, Attorney at Law  Occupation Attorney  Aggregate Year-to-Date > \$ 450.00	10-16-96	250.00
E. Full Name, Mailing Address and ZIP Code  Thomas E. Tucker 120 Irvine Cove Circle Laguna Beach CA 92651-1041  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer JenStar Capital  Occupation Executive  Aggregate Year-to-Date > \$ 250.00	10-16-96	250.00
F. Full Name, Mailing Address and ZIP Code  Joyce Tucker 120 Irvine Cove Circle Laguna Beach CA 92651-1041  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation Homemaker  Aggregate Year-to-Date > \$ 250.00	10-16-96	250.00
G. Full Name, Mailing Address and ZIP Code  James Worthington 328 Buena Vista Balboa CA 92661-1125  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Worthington Equities  Occupation Executive  Aggregate Year-to-Date > \$ 250.00	10-7-96	250.00

SUBTOTAL of Receipts This Page (optional)..... 2200.00

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

PAGE 6 OF 11  
FOR LINE NO. 11a1

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NAME OF COMMITTEE (In Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles W. Dement 21522 Tree Top Lane Laguna Beach CA 92651-2041	Dtek Corporation	10-16-96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Executive	Aggregate Year-to-Date > \$ 250.00	
<input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dale A. Dement 21522 Tree Top Lane Laguna Beach CA 92651-2041	Dtek Corporation	10-16-96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Admin. Assistant	Aggregate Year-to-Date > \$ 250.00	
<input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Douglas S. Cavanaugh 52 Emerald Bay Laguna Beach CA 92651	The Ruby Restaurant Group	10-7-96	500.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Executive	Aggregate Year-to-Date > \$ 500.00	
<input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank M. Haffer 14581 Bosch Irvine CA 92714	Edwards Theaters Circuit, Inc.	10-7-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Executive	Aggregate Year-to-Date > \$ 350.00	
<input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M. McGuickin Two Ashbury Terrace San Francisco CA 94117-4502	Union Bank of California	10-18-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Attorney	Aggregate Year-to-Date > \$ 1000.00	
<input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Vinson Evans Greene 13451 Spirit Way Irvine CA 92620-3214	N/A	10-7-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Retired	Aggregate Year-to-Date > \$ 350.00	
<input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William O. Passco 7 Dathan Court Newport Beach CA 92660	YHP Investments, Inc.	10-7-96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	Occupation Executive	Aggregate Year-to-Date > \$ 250.00	
<input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)..... 2300.00

TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eileen Passo 7 Chatham Court Newport Beach CA 92660  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A  Occupation: Homemaker  Aggregate Year-to-Date > \$ 250.00	10-7-96	250.00
Susan V. Watson Post Office Box 1120 Southport CT 06490-2120  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Burn & Bradstreet  Occupation: Executive  Aggregate Year-to-Date > \$ 500.00	10-7-96	250.00
John Mastrocola 121 Matise Circle Aliso Viejo CA 92656-3867  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Covenant Care  Occupation: Executive  Aggregate Year-to-Date > \$ 350.00	10-16-96	100.00
Lola Mastrocola 121 Matise Circle Aliso Viejo CA 92656-3867  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Covenant Care  Occupation: Executive  Aggregate Year-to-Date > \$ 350.00	10-16-96	100.00
E.J. Gulligan 24 Gray Court Irvine CA 92612-4049  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Long Beach Medical Center  Occupation: Physician  Aggregate Year-to-Date > \$ 700.00	10-7-96	200.00
Peter M. Craig 6 Chanton Way Laguna Niguel CA 92677  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Rainbow Technologies  Occupation: Executive  Aggregate Year-to-Date > \$ 350.00	10-16-96	350.00
Katherine E. Helms 612 1/2 Avocado Avenue Corona del Mar CA 92625  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Triangle Distributing Co.  Occupation: Public Relations  Aggregate Year-to-Date > \$ 350.00	10-7-96	350.00

SUBTOTAL of Receipts This Page (optional)..... 1600.00

TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (in Full) **Christopher Cox Congressional Committee** FEC ID No. **C00223297**

<p><b>A. Full Name, Mailing Address and ZIP Code</b>                  Daniel O. Kennedy                  1200 Park Boulevard, #620                  Newport Beach CA 92660</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  Miller Brewing Company</p> <p>Occupation                  Executive</p> <p>Aggregate Year-to-Date &gt; \$ 656.97</p>	<p>Date (month, day, year)                  10-16-95</p>	<p>Amount of Each Receipt this Period                  106.97</p> <p>(In-kind/Beverages)</p>
<p><b>B. Full Name, Mailing Address and ZIP Code</b>                  Minoru Ted Inouye                  20889 Park Terrace Lane                  Mission Viejo CA 92692-6116</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  First Housing Concepts</p> <p>Occupation                  Executive</p> <p>Aggregate Year-to-Date &gt; \$ 850.00</p>	<p>Date (month, day, year)                  10-16-95</p>	<p>Amount of Each Receipt this Period                  300.00</p>
<p><b>C. Full Name, Mailing Address and ZIP Code</b>                  Robert A. Huber                  32241 Cook Lane                  San Juan Capistrano CA 92675-3948</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  Price Waterhouse</p> <p>Occupation                  ACCOUNTANT</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year)                  10-16-96</p>	<p>Amount of Each Receipt this Period                  500.00</p>
<p><b>D. Full Name, Mailing Address and ZIP Code</b>                  Christopher C. DeMuth                  1201 Suffield Drive                  McLean VA 22101-2348</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  American Enterprise Institute</p> <p>Occupation                  Executive</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year)                  10-7-96</p>	<p>Amount of Each Receipt this Period                  500.00</p>
<p><b>E. Full Name, Mailing Address and ZIP Code</b>                  Robert Jastrow                  10468 Lindbrook Drive                  Los Angeles CA 90024-3330</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  Mt. Wilson Institute</p> <p>Occupation                  Physician</p> <p>Aggregate Year-to-Date &gt; \$ 550.00</p>	<p>Date (month, day, year)                  10-16-96</p>	<p>Amount of Each Receipt this Period                  350.00</p>
<p><b>F. Full Name, Mailing Address and ZIP Code</b>                  Jeffrey M. Gardner                  425 North Buckingham Avenue                  Los Angeles CA 90049-2638</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  S.C. Development</p> <p>Occupation                  Real Estate</p> <p>Aggregate Year-to-Date &gt; \$ 500.00</p>	<p>Date (month, day, year)                  10-7-95</p>	<p>Amount of Each Receipt this Period                  500.00</p>
<p><b>G. Full Name, Mailing Address and ZIP Code</b>                  Paul F. Felino                  4 Mountain Gate                  Cabo de Caza EA 92679-4836</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General  <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer                  Emulex Corporation</p> <p>Occupation                  Executive</p> <p>Aggregate Year-to-Date &gt; \$ 250.00</p>	<p>Date (month, day, year)                  10-7-96</p>	<p>Amount of Each Receipt this Period                  250.00</p>

SUBTOTAL of Receipts This Page (optional)..... 2506.97

TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Daranne G. Polino 4 Mountain Gate Coto de Caza CA 92670-4836  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	N/A  Occupation: Homemaker  Aggregate Year-to-Date > \$ 250.00	10-7-96	250.00
B. Full Name, Mailing Address and ZIP Code Marjann F. Holmes 10208 Overhill Drive Santa Ana CA 92705-1560  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: N/A  Occupation: Homemaker  Aggregate Year-to-Date > \$ 250.00	10-16-96	250.00
C. Full Name, Mailing Address and ZIP Code George D. Holmes 10208 Overhill Drive Santa Ana CA 92705-1560  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Sensor Medica Corporation  Occupation: Executive  Aggregate Year-to-Date > \$ 250.00	10-16-96	250.00
D. Full Name, Mailing Address and ZIP Code John V. Croul 1306 Cambridge Lane Newport Beach CA 92660-5609  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Bchr  Occupation: Executive  Aggregate Year-to-Date > \$ 1000.00	10-7-96	1000.00
E. Full Name, Mailing Address and ZIP Code Irving R. Matherson 2359 Rockridge Circle Orange CA 92667-2034  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Tait & Association, Inc.  Occupation: Finance  Aggregate Year-to-Date > \$ 350.00	10-7-96	350.00
F. Full Name, Mailing Address and ZIP Code Virginia H. Robins 1124 Highland Drive Newport Beach CA 92660-5618  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: N/A  Occupation: Homemaker  Aggregate Year-to-Date > \$ 500.00	10-16-96	500.00
G. Full Name, Mailing Address and ZIP Code Paul B. Bender 35 Burning Tree Road Newport Beach CA 92660-5407  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: Hobby Shack  Occupation: Executive  Aggregate Year-to-Date > \$ 250.00	10-7-96	250.00

SUBTOTAL of Receipts This Page (optional)..... 2850.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedules for each category of the Detailed Summary Page

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Sally F. Bender 35 Burning Tree Road Newport Beach CA 92660-5107	N/A	10-7-96	250.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hugh Weckerly 2972 Chatsworth Boulevard San Diego CA 92106-1464	N/A	10-7-96	300.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Retired	Aggregate Year-to-Date > \$ 600.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John M. Tettmer 1978 Port Seabourne Newport Beach CA 92660	Self Employed	10-16-96	150.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer	Aggregate Year-to-Date > \$ 250.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John K. Logan 26527 Silver Spur Road Rancho Palos Verdes CA 90275-2315	Inzer-Logic Co.	10-7-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Engineer	Aggregate Year-to-Date > \$ 450.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Morgan L. Morgan 1441 Avocado Avenue Suite 710 Newport Beach CA 92660	Morgan L. Morgan, M.D.	10-7-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$ 350.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
William M. Sokol 143 Emerald Bay Laguna Beach CA 92651	William M. Sokol, M.D.	10-7-96	350.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Physician	Aggregate Year-to-Date > \$ 350.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Emily Scott 5532 Washington Street San Francisco CA 94110	N/A	10-16-96	1000.00
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Homemaker	Aggregate Year-to-Date > \$ 1000.00	

SUBTOTAL of Receipts This Page (optional)..... 2750.00

TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (in full)

Christopher Cox Congressional Committee

PEC ID No. C00223297

<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Stanley B. Crain 7117 Brighton Circle Orange CA 92669</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Cox California PCS, Inc.</p> <p>Occupation</p> <p>Executive</p> <p>Aggregate Year-to-Date &gt; \$ 350.00</p>	<p>Date (month, day, year)</p> <p>10-16-96</p>	<p>Amount of Each Receipt this Period</p> <p>350.00</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Emarked contributions next 2 records Rockwell International, Inc. Good Gov. 625 Liberty Avenue Pittsburgh, PA 15222</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>N/A</p> <p>Occupation</p> <p>N/A</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p> <p>\$375.03 Emarked</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>Robert G. Christiansen 29332 Tierce Laguna Niguel CA 92677-1635</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Rockwell International</p> <p>Occupation</p> <p>Executive</p> <p>Aggregate Year-to-Date &gt; \$ 150.05</p>	<p>Date (month, day, year)</p> <p>10-7-96</p>	<p>Amount of Each Receipt this Period</p> <p>16.67</p> <p>Emarked</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Timothy J. Dannelly 2500 Arbutus Street Newport Beach CA 92660-6140</p> <p>Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Rockwell International Corporation</p> <p>Occupation</p> <p>Executive</p> <p>Aggregate Year-to-Date &gt; \$ 225.00</p>	<p>Date (month, day, year)</p> <p>10-7-96</p>	<p>Amount of Each Receipt this Period</p> <p>25.00</p> <p>Emarked</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Occupation</p> <p>Aggregate Year-to-Date &gt; \$</p>	<p>Date (month, day, year)</p>	<p>Amount of Each Receipt this Period</p>

<p>SUBTOTAL of Receipts This Page (optional).....</p>	<p>391.67</p>
<p>TOTAL This Period (last page this line number only).....</p>	<p>24849.64</p>

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

**A. Full Name, Mailing Address and ZIP Code**  
 J.G. Boswell Company Employee's PAC  
 333 South Hope Street Suite 4600  
 Los Angeles, CA 90071

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
N/A

Occupation  
N/A

Aggregate Year-to-Date > \$ 500.00

Date (month, day, year)  
10-16-96

Amount of Each Receipt this Period  
500.00

**B. Full Name, Mailing Address and ZIP Code**  
 NRA Political Victory Fund  
 1600 Rhode Island Avenue, NW  
 Washington, DC 20036

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
N/A

Occupation  
N/A

Aggregate Year-to-Date > \$ 2000.00

Date (month, day, year)  
10-7-96

Amount of Each Receipt this Period  
2000.00

**C. Full Name, Mailing Address and ZIP Code**  
 Hughes Aircraft Company Active Citizenship Fund  
 Post Office Box 80028 C-129  
 Los Angeles, CA 90080

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
N/A

Occupation  
N/A

Aggregate Year-to-Date > \$ 500.00

Date (month, day, year)  
10-7-96

Amount of Each Receipt this Period  
500.00

**D. Full Name, Mailing Address and ZIP Code**  
 WESPAC of the Dow Chemical Company  
 P.O. Box 1398  
 Pittsburg, CA 94565

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
N/A

Occupation  
N/A

Aggregate Year-to-Date > \$ 1000.00

Date (month, day, year)  
10-16-96

Amount of Each Receipt this Period  
1000.00

**E. Full Name, Mailing Address and ZIP Code**  
 Nat'l Fed. of Ind. Bus./Save America's Free Enterp.  
 53 Century Boulevard Suite 500  
 Nashville, TN 37214

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
N/A

Occupation  
N/A

Aggregate Year-to-Date > \$ 500.00

Date (month, day, year)  
10-7-96

Amount of Each Receipt this Period  
500.00

**F. Full Name, Mailing Address and ZIP Code**  
 American Dental PAC  
 1111 14th Street, NW 11th Floor  
 Washington, DC 20005

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
N/A

Occupation  
N/A

Aggregate Year-to-Date > \$ 1000.00

Date (month, day, year)  
10-16-96

Amount of Each Receipt this Period  
1000.00

**G. Full Name, Mailing Address and ZIP Code**  
 Nat'l Utility Contractors Assoc. Leg. Info. & Action  
 4301 North Fairfax Drive Suite 360  
 Arlington, VA 22203

Receipt For:  Primary  General  
 Other (specify):

Name of Employer  
N/A

Occupation  
N/A

Aggregate Year-to-Date > \$ 500.00

Date (month, day, year)  
10-16-96

Amount of Each Receipt this Period  
500.00

SUBTOTAL of Receipts This Page (optional)..... 6000.00

TOTAL This Period (last page this line number only).....

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NAME OF COMMITTEE (to FUD)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code Howard Jarvis Taxpayer Assoc. PAC 111 Pacific Suite 270 Irvine, CA 92718  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation N/A  Aggregate Year-to-Date > \$ 500.00	Date (month, day, year) 10-16-96	Amount of Each Receipt this Period 500.00
B. Full Name, Mailing Address and ZIP Code Time Warner, Inc. PAC 75 Rockefeller Plaza New York, NY 10019  Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer N/A  Occupation N/A  Aggregate Year-to-Date > \$ 2000.00	Date (month, day, year) 10-16-96	Amount of Each Receipt this Period 2000.00
C. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation   Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation   Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation   Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation   Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code   Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer   Occupation   Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... 2500.00

TOTAL This Period (last page this line number only)..... 5500.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FBC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C.O.G.S. 11343 Stewart street El Monte, CA 91731	Yard signs Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-11-96	1500.00
B. Full Name, Mailing Address and ZIP Code Dean McGrath 6117 Woodmont Road Alexandria, VA 22307	Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-2-96	1666.66
C. Full Name, Mailing Address and ZIP Code Federal Express 2650 Thousand Oaks Blvd. Memphis, TN 38118	Package Delivery Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-9-96	29.75
D. Full Name, Mailing Address and ZIP Code Byatt Regency 17900 Jamboree Road Irvine, CA 92714	Event room & Catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-15-96	2553.01
E. Full Name, Mailing Address and ZIP Code Pacific Bell Payment Center Van Nuys, CA 91386	Campaign Telephone Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-11-96	69.21
F. Full Name, Mailing Address and ZIP Code Randi Bronk 17 Gunnison Irvine, CA 92612	Payroll Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-4-96	1609.51
G. Full Name, Mailing Address and ZIP Code The Upper Crust Caterers 1790 Whittier Avenue Costa Mesa, CA 92627	Event catering Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-16-96	404.06
H. Full Name, Mailing Address and ZIP Code Tom Marcellus 1927A Harbor Boulevard Costa Mesa, CA 92627	Consulting Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-4-96	2300.00
I. Full Name, Mailing Address and ZIP Code Towns Mailing Service 3441 West MacArthur Blvd. Santa Ana, CA 92704	Mail Production Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-3-96	500.00

SUBTOTAL of Disbursements This Page (optional) . . . . . 10632.20

TOTAL This Period (last page this line number only) . . . . .

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)

christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
U.S. Postmaster 31001 West Sunflower Avenue Santa Ana, CA 92799	Postage Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-10-96	15001.12
B. Full Name, Mailing Address and ZIP Code Ralph's Market 14400 Culver Drive Irvine, CA 92715	Beverages for event Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-16-96	106.97 In-Kind
C. Full Name, Mailing Address and ZIP Code UNITEMIZED EXPENSES	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	10-1-96 thru 10-16-96	254.39
D. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	15362.48
TOTAL This Period (last page this line number only)	25994.68

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
	1	2
FOR LINE NUMBER		21

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NAME OF COMMITTEE (in Full)

Christopher Cox Congressional Committee

FEC ID No. C00223297

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Contribution	Date (month, day, year)	Amount of Each Disbursement This Period
Arena PAC 201 North Union St. Ste. 520 Alexandria, VA 22314	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 5000.00	10-2-96	5000.00
B. Full Name, Mailing Address and ZIP Code Brian Bilbray for Congress 2445 Morena Blvd. Suite 100 San Diego, CA 92110	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	10-8-96	1000.00
C. Full Name, Mailing Address and ZIP Code Comm. to Re-Elect J.D. Bayworth Post office Box 14273 Scottsdale, AZ 85267	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	10-8-96	1000.00
D. Full Name, Mailing Address and ZIP Code Friends of Wethercutt for Congress Post Office Box 1925 Spokane, WA 99210	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	10-8-96	1000.00
E. Full Name, Mailing Address and ZIP Code Funderburk for Congress Post office Box 1124 Dunn, NC 28335	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	10-8-96	1000.00
F. Full Name, Mailing Address and ZIP Code Harvey for Congress Post office Box 2084 Bakersfield, CA 93303	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	10-1-96	1000.00
G. Full Name, Mailing Address and ZIP Code Boke for Congress '96 Post office Box 26290 Fairview Park, OH 44126	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	10-8-96	1000.00
H. Full Name, Mailing Address and ZIP Code Laguna Beach Republican Club 330 Cajon Terrace Laguna Beach, CA 92651	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 250.00	10-8-96	250.00
I. Full Name, Mailing Address and ZIP Code Longley for Congress '96 726 Forest Avenue Portland, ME 04103	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	10-8-96	1000.00

SUBTOTAL of Disbursements This Page (optional) . . . . . 13250.00

TOTAL This Period (last page this line number only) . . . . .

SCHEDULE B

ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)		FEC ID No. C00223297	
A. Full Name, Mailing Address and ZIP Code National Republican Congress. Committee 120 First street, SE Washington, DC 20003	Purpose of Disbursement <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 47500.00	Date (month, day, year) 10-10-96	Amount of Each Disbursement This Period 40000.00
B. Full Name, Mailing Address and ZIP Code Randy Tate for Congress Post Office Box 4216 Federal way, VA 98053	Purpose of Disbursement <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	Date (month, day, year) 10-8-96	Amount of Each Disbursement This Period 1000.00
C. Full Name, Mailing Address and ZIP Code Jon Christensen for Congress 8630 Cass Avenue, Ste. 203 Omaha, NE 68114	Purpose of Disbursement <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	Date (month, day, year) 10-8-96	Amount of Each Disbursement This Period 1000.00
D. Full Name, Mailing Address and ZIP Code Walsh for Congress Committee Post Office Box 1974 Syracuse, NY 13201	Purpose of Disbursement <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	Date (month, day, year) 10-8-96	Amount of Each Disbursement This Period 1000.00
E. Full Name, Mailing Address and ZIP Code Walter Jones for Congress Post Office Box 99667 Raleigh, NC 27624	Purpose of Disbursement <b>Contribution</b> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 1000.00	Date (month, day, year) 10-8-96	Amount of Each Disbursement This Period 1000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement <b>Contribution</b> 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 <b>Contribution</b> 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 <b>Contribution</b> 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 <b>Contribution</b> 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)			46000.00
TOTAL This Period (last page this line number only)			56250.00

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.

Hand Delivered DATE OF RECEIPT  
10-24-96

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

10-25-96

**PREPARED** **DATE PREPARED**