

MUNGON CATHY
Form 4/A
November 17, 2005

FORM 4

**UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549**

OMB APPROVAL

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STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *
MUNGON CATHY

(Last) (First) (Middle)
23 PASTEUR ROAD
(Street)

IRVINE, CA 92618
(City) (State) (Zip)

2. Issuer Name and Ticker or Trading Symbol
WESTCORP /CA/ [WES]

3. Date of Earliest Transaction
(Month/Day/Year)
11/16/2005

4. If Amendment, Date Original Filed(Month/Day/Year)
11/16/2005

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

___ Director ___ 10% Owner
___ Officer (give title below) ___X___ Other (specify below)
EVP for Western Financial Bank

6. Individual or Joint/Group Filing(Check Applicable Line)
X Form filed by One Reporting Person
___ Form filed by More than One Reporting Person

Table I - Non-Derivative Securities Acquired, Disposed of, or Beneficially Owned

1. Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired (A) or Disposed of (D) (Instr. 3, 4 and 5)	5. Amount of Securities Beneficially Owned Following Reported Transaction(s) (Instr. 3 and 4)	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)	
			Code	V	Amount	(D)	Price	
Common Stock					17,887	I	Westcorp Employee stock Ownership and Salary Savings Plan	
Common Stock	11/17/2005		M	750	A	\$ 17.32	3,250	D
Common Stock	11/17/2005		M	1,000	A	\$ 18.3	4,250	D

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Common Stock	11/17/2005	M	2,500	A	\$ 18.78	6,750	D
Common Stock	11/17/2005	M	515	A	\$ 42.19	7,265	D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

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(9-02)

Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned
(e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 3)	2. Conversion or Exercise Price of Derivative Security	3. Transaction Date (Month/Day/Year)	3A. Deemed Execution Date, if any (Month/Day/Year)	4. Transaction Code (Instr. 8)	5. Number of Derivative Securities Acquired (A) or Disposed of (D) (Instr. 3, 4, and 5)	6. Date Exercisable and Expiration Date (Month/Day/Year)	7. Title and Amount of Underlying Securities (Instr. 3 and 4)	Amount or Number of Shares	
				Code	V (A) (D)	Date Exercisable	Expiration Date	Title	
Employee Stock Options - Right to Buy	\$ 17.32	11/17/2005		M	750	02/22/2005 02/22/2008	Common Stock	750	
Employee Stock Options - Right to Buy	\$ 18.3	11/17/2005		M	1,000	02/15/2005 02/15/2009	Common Stock	1,000	
Employee Stock Options - Right to Buy	\$ 18.78	11/17/2005		M	2,500	02/20/2005 02/20/2008	Common Stock	2,500	
Employee Stock Options - Right to Buy	\$ 42.19	11/17/2005		M	515	02/18/2005 02/18/2009	Common Stock	515	

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
MUNGON CATHY 23 PASTEUR ROAD IRVINE, CA 92618				EVP for Western Financial Bank

Signatures

Cathy Mungon	11/17/2005
<small>**Signature of Reporting Person</small>	<small>Date</small>

Explanation of Responses:

- * If the form is filed by more than one reporting person, *see* Instruction 4(b)(v).
 - ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. *See* 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) 1,000 shares will vest 2/15/2006
 - (2) 2,500 shares will vest 2/20/2006
 - (3) 823 shares will vest 2/18/06 and 2,370 will vest 2/18/2007

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.