

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM

2001 FEB 26 A 11:29

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <u>Polaris Industries Inc.</u> <u>Political Participation Program.</u>	
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <u>2100 Highway 55</u>	2. FEC IDENTIFICATION NUMBER <u>C 00279497</u>
CITY, STATE and ZIP CODE <u>Medina, MN 55340</u>	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report

Monthly Report Due On:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |

- 12-Day Pre-Election Report for the _____
 (Type of Election)
 election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
 on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/28/00</u> through <u>12/31/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>		\$ 27,838.78
(b) Cash on Hand at Beginning of Reporting Period	\$ 31,119.82	
(c) Total Receipts (from Line 19)	\$ 3,678.94	\$ 28,959.98
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 34,798.74	\$ 56,798.74
7. Total Disbursements (from Line 3D)	\$ 0	\$ 22,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 34,798.74	\$ 34,798.74
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ —	For further information contact: Federal Election Commission 909 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ —	

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

Mike Malone

Signature of Treasurer

Michael Malone

Date

2/22/01

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

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FEC FORM 3X

(revised 9/93)

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/91)

NAME OF COMMITTEE <i>Polaris Industries, Inc. Political Participation Program</i>		REPORT COVERING PERIOD FROM <i>11/28/00</i> TO <i>12/31/00</i>	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	<i>1,367.16</i>	<i>13,203.10</i>	11(a)(i)
ii. Unitemized	<i>2,311.78</i>	<i>15,756.82</i>	11(a)(ii)
iii. Total (add i and ii) >	<i>3,678.94</i>	<i>28,959.98</i>	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) >	<i>3,678.94</i>	<i>28,959.98</i>	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	<i>3,678.94</i>	<i>28,959.98</i>	19
20. Total Federal Receipts (subtract line 18 from line 19) >	<i>3,678.94</i>	<i>28,959.98</i>	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)(i)
i. Federal Share			21(a)(ii)
ii. Non-Federal Share			21(b)
b. Other Federal Operating Expenditures			21(c)
c. Total Operating Expenditures (add a i, a ii, and b) >			22
22. Transfers to Affiliated/Other Party Committees			23
23. Contributions to Federal Candidates/Committees and Other Political Committees	<i>0</i>	<i>22,000.00</i>	24
24. Independent Expenditures (use Schedule E)			25
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			26
26. Loan Repayments Made			27
27. Loans Made			28(a)
28. Refunds of Contributions To:			28(b)
a. Individual/Persons Other Than Political Committees			28(c)
b. Political Party Committees			28(d)
c. Other Political Committees (such as PACs)			29
d. Total Contribution Refunds (add a, b and c) >			30
29. Other Disbursements	<i>0</i>	<i>22,000.00</i>	31
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	<i>0</i>	<i>22,000.00</i>	32
31. Total Federal Disbursements (subtract line 21 & ii from line 30) >	<i>0</i>	<i>22,000.00</i>	33
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)	<i>3,678.94</i>	<i>28,959.98</i>	34
33. Total Contribution Refunds (from line 28d)	<i>-</i>	<i>-</i>	35
34. Net Contributions (other than loans) (subtract line 33 from 32)	<i>3,678.94</i>	<i>28,959.98</i>	36
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	<i>-</i>	<i>-</i>	37
36. Offsets to Operating Expenditures (from line 15)	<i>-</i>	<i>-</i>	38
37. Net Operating Expenditures (subtract line 36 from 35) >	<i>-</i>	<i>-</i>	39

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 5
FOR LINE NUMBER 119(a)

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 collect contributions from such committee

NAME OF COMMITTEE (in Full)

*Polaris Industries Inc.
Political Participation Program*

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
<i>W. Hall Wendel, Jr. 2100 Highway 55 Medina, MN 55340</i>	<i>Polaris Ind. Inc.</i>	<i>Payroll Deduction</i>	<i>180.00 (60.00 bi-weekly)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Chairman</i>	Aggregate Year-to-Date > \$ <i>1,560.00</i>	
<i>Claude Picard 2100 Highway 55 Medina, MN 55340</i>	<i>Polaris Ind. Inc.</i>	<i>Payroll Deduction</i>	<i>60.00 (20.00 bi-weekly)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Manager</i>	Aggregate Year-to-Date > \$ <i>520.00</i>	
<i>Jeff Bjorkman 2100 Highway 55 Medina, MN 55340</i>	<i>Polaris Ind. Inc.</i>	<i>Payroll Deduction</i>	<i>60.00 (20.00 bi-weekly)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>VP</i>	Aggregate Year-to-Date > \$ <i>520.00</i>	
<i>Charles Baxter 2100 Highway 55 Medina, MN 55340</i>	<i>Polaris Ind. Inc.</i>	<i>Payroll Deduction</i>	<i>60.00 (20.00 bi-weekly)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>VP</i>	Aggregate Year-to-Date > \$ <i>520.00</i>	
<i>Mike Malone 2100 Highway 55 Medina, MN 55340</i>	<i>Polaris Ind. Inc.</i>	<i>Payroll Deduction</i>	<i>45.00 (15.00 bi-weekly)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>VP</i>	Aggregate Year-to-Date > \$ <i>320.00</i>	
<i>Richard Stenge 2100 Highway 55 Medina, MN 55340</i>	<i>Polaris Ind. Inc.</i>	<i>Payroll Deduction</i>	<i>45.00 (15.00 bi-weekly)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Manager</i>	Aggregate Year-to-Date > \$ <i>390.00</i>	
<i>Tim LeJong 2100 Highway 55 Medina, MN 55340</i>	<i>Polaris Ind. Inc.</i>	<i>Payroll Deduction</i>	<i>45.00 (15.00 bi-weekly)</i>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: <i>Manager</i>	Aggregate Year-to-Date > \$ <i>390.00</i>	

SUBTOTAL of Receipts This Page (optional)

495.00

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 2 OF 5
FOR LINE NUMBER 119(1)

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)			
Polan's Industries Inc. Political Participation Program			
<p>A. Full Name, Mailing Address and ZIP Code</p> <p>Gary Olson 2100 Highway 55 Medina, MN 55340</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Polan's Ind. Inc.</p> <p>Occupation</p> <p>Manager</p> <p>Aggregate Year-to-Date > \$ 420.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p> <p>18.00</p>	<p>Amount of Each Receipt this Period</p> <p>54.00</p> <p>bi-weekly</p>
<p>B. Full Name, Mailing Address and ZIP Code</p> <p>Albert Peras 2100 Highway 55 Medina, MN 55340</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Polan's Ind. Inc.</p> <p>Occupation</p> <p>Manager</p> <p>Aggregate Year-to-Date > \$ 320.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p> <p>15.00</p>	<p>Amount of Each Receipt this Period</p> <p>45.00</p> <p>bi-weekly</p>
<p>C. Full Name, Mailing Address and ZIP Code</p> <p>David Thompson 2100 Highway 55 Medina, MN 55340</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Polan's Ind. Inc.</p> <p>Occupation</p> <p>Manager</p> <p>Aggregate Year-to-Date > \$ 422.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p> <p>18.00</p>	<p>Amount of Each Receipt this Period</p> <p>54.00</p> <p>bi-weekly</p>
<p>D. Full Name, Mailing Address and ZIP Code</p> <p>Michael Trihey 2100 Highway 55 Medina, MN 55340</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Polan's Ind. Inc.</p> <p>Occupation</p> <p>Manager</p> <p>Aggregate Year-to-Date > \$ 380.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p> <p>30.00</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>bi-weekly</p>
<p>E. Full Name, Mailing Address and ZIP Code</p> <p>Norm Berg 2100 Highway 55 Medina, MN 55340</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Polan's Ind. Inc.</p> <p>Occupation</p> <p>Manager</p> <p>Aggregate Year-to-Date > \$ 225.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p> <p>10.00</p>	<p>Amount of Each Receipt this Period</p> <p>30.00</p> <p>bi-weekly</p>
<p>F. Full Name, Mailing Address and ZIP Code</p> <p>James Bierat 2100 Highway 55 Medina, MN 55340</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Polan's Ind. Inc.</p> <p>Occupation</p> <p>Manager</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p> <p>10.00</p>	<p>Amount of Each Receipt this Period</p> <p>30.00</p> <p>bi-weekly</p>
<p>G. Full Name, Mailing Address and ZIP Code</p> <p>Charles Cronc 2100 Highway 55 Medina, MN 55340</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):</p>	<p>Name of Employer</p> <p>Polan's Ind. Inc.</p> <p>Occupation</p> <p>Manager</p> <p>Aggregate Year-to-Date > \$ 240.00</p>	<p>Date (month, day, year)</p> <p>Payroll Deduction</p> <p>20.00</p>	<p>Amount of Each Receipt this Period</p> <p>60.00</p> <p>bi-weekly</p>
<p>SUBTOTAL of Receipts This Page (optional)</p>			333.00
<p>TOTAL This Period (last page this line number only)</p>			

SCHEDULE A

ITEMIZED RECEIPTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 3 OF 5
FOR LINE NUMBER 1190

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NAME OF COMMITTEE (in Full)

Polans Industries Inc.
Political Participation Program

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Fisher 2100 Highway 55 Medina, MN 55340	Polans Ind. Inc.	Payroll Deduction	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 300.00	(25.00 bi-weekly)
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mitchell Johnson 2100 Highway 55 Medina, MN 55340	Polans Ind. Inc.	Payroll Deduction	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 240.00	(20.00 bi-weekly)
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mark Karl 2100 Highway 55 Medina, MN 55340	Polans Ind. Inc.	Payroll Deduction	51.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 246.00	(17.00 bi-weekly)
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard Robes 2100 Highway 55 Medina, MN 55340	Polans Ind. Inc.	Payroll Deduction	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 240.00	(20.00 bi-weekly)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Kullig 2100 Highway 55 Medina, MN 55340	Polans Ind. Inc.	Payroll Deduction	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 240.00	(20.00 bi-weekly)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bennett Morgan 2100 Highway 55 Medina, MN 55340	Polans Ind. Inc.	Payroll Deduction	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 268.00	(20.00 bi-weekly)
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ed Skonroch 2100 Highway 55 Medina, MN 55340	Polans Ind. Inc.	Payroll Deduction	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 211.53	(20.00 bi-weekly)

SUBTOTAL of Receipts This Page (optional)

426.00

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 4 OF 5
FOR LINE NUMBER 119(1)

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NAME OF COMMITTEE (in Full)			
Polaris Industries Inc, Political Participation Program			
A. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Mary Zins 2100 Highway 55 Medina, MN 55340		Polaris Ind. Inc.	60.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	(20.00 bi-weekly)
		Aggregate Year-to-Date > \$	310.00
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Michael Jonikas 2100 Highway 55 Medina, MN 55340		Polaris Ind. Inc.	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	
		Aggregate Year-to-Date > \$	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
John Corness 2100 Highway 55 Medina, MN 55340		Polaris Ind. Inc.	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP	
		Aggregate Year-to-Date > \$	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Larae Krahn 2100 Highway 55 Medina, MN 55340		Polaris Ind. Inc.	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	
		Aggregate Year-to-Date > \$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Mark McCormick 2100 Highway 55 Medina, MN 55340		Polaris Ind. Inc.	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Controller	
		Aggregate Year-to-Date > \$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Kevin Ness 2100 Highway 55 Medina, MN 55340		Polaris Ind. Inc.	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	
		Aggregate Year-to-Date > \$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Amount of Each Receipt this Period
Robert Nygaard 2100 Highway 55 Medina, MN 55340		Polaris Ind. Inc.	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Gen. Mgr.	
		Aggregate Year-to-Date > \$	

SUBTOTAL of Receipts This Page (optional)	60.00
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 5 OF 5
FOR LINE NUMBER 119(1)

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NAME OF COMMITTEE (in Full) **Polan's Industries Inc. Political Participation Program**

A. Full Name, Mailing Address and ZIP Code Jim O'Neill 2100 Highway 55 Medina, MN 55340	Name of Employer Polan's Ind. Inc.	Date (month, day, year) 7/00	Amount of Each Receipt this Period - 0 -
	Occupation Manager	Aggregate Year-to-Date 5	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

B. Full Name, Mailing Address and ZIP Code Charles Ramsey 2100 Highway 55 Medina, MN 55340	Name of Employer Polan's Ind. Inc.	Date (month, day, year) 7/00	Amount of Each Receipt this Period - 0 -
	Occupation Manager	Aggregate Year-to-Date 5	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

C. Full Name, Mailing Address and ZIP Code Richard Patrick 2100 Highway 55 Medina, MN 55340	Name of Employer Polan's Ind. Inc.	Date (month, day, year) 7/00	Amount of Each Receipt this Period - 0 -
	Occupation VP	Aggregate Year-to-Date 6	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

D. Full Name, Mailing Address and ZIP Code Thomas Tiller 2100 Highway 55 Medina, MN 55340	Name of Employer Polan's Ind. Inc.	Date (month, day, year) 7/00	Amount of Each Receipt this Period - 0 -
	Occupation President	Aggregate Year-to-Date 5	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

E. Full Name, Mailing Address and ZIP Code Abdulla Elmaghrashy 2100 Highway 55 Medina, MN 55340	Name of Employer Polan's Ind. Inc.	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 20.58 (8.86 bi-weekly)
	Occupation Manager	Aggregate Year-to-Date 230.74	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

F. Full Name, Mailing Address and ZIP Code Thomas Ruschnaupt 2100 Highway 55 Medina, MN 55340	Name of Employer Polan's Ind. Inc.	Date (month, day, year) Payroll Deduction	Amount of Each Receipt this Period 20.58 (8.86 bi-weekly)
	Occupation Manager	Aggregate Year-to-Date 230.74	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

G. Full Name, Mailing Address and ZIP Code 2100 Highway 55 Medina, MN 55340	Name of Employer Polan's Ind. Inc.	Date (month, day, year)	Amount of Each Receipt this Period
	Occupation	Aggregate Year-to-Date 5	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)	53.16
TOTAL This Period (last page this line number only)	1,307.10

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.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C) <i>8-29-01</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jm 11</i> PREPARER	<i>8-26-01</i> DATE PREPARED