

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

ADDRESS (number and street) ▼

2101 WILSON BOULEVARD SUITE 400

☐ Check if different than previously reported. (ACC)

Arlington

VA

22201

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00325324

3. IS THIS
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☒ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

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 John Hollay

Signature of Treasurer

John Hollay

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
04 / 01 / 2015 To: M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2015		19217.64
(b) Cash on Hand at Beginning of Reporting Period.....	17392.70	
(c) Total Receipts (from Line 19)	901.84	23761.36
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	18294.54	42979.00
7. Total Disbursements (from Line 31)	36.90	24721.36
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	18257.64	18257.64
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y Y
04 / 01 / 2015

To:

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

785.00

11717.00

(ii) Unitemized

116.84

2044.36

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

901.84

13761.36

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

10000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

901.84

23761.36

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),

12, 13, 14, 15, 16, 17, and 18(c)) ►

901.84

23761.36

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

901.84

23761.36

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	36.90	221.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	36.90	221.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	24500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	36.90	24721.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36.90	24721.36

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	901.84	23761.36
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	901.84	23761.36
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	36.90	221.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	36.90	221.36

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. Peter Vitaliano

Mailing Address 6303 North 28th St

City State Zip Code
Arlington VA 22207-1111

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

455.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : A24C2258A310A47A4B68

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

B. Jamie S. Jonker

Mailing Address 1712 Corcoran Street Nw Apt. 1
Apt 1

City State Zip Code
Washington DC 20009-2415

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : AD9B5CE8C4ADD4A2FA52

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Tom M Balmer

Mailing Address 310 Cloverway Drive

City State Zip Code
Alexandria VA 22314-4841

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

581.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2015

Transaction ID : AEF53DEAA00364B34890

Amount of Each Receipt this Period

83.00

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

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

198.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 11

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. Jim Mulhern

Mailing Address 8000 Inverness Ridge Rd.

City State Zip Code
Potomac MD 20854-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.00

Date of Receipt

04 / 15 / 2015

Transaction ID : A5D34BCE631DD451097B

Amount of Each Receipt this Period

83.00

Full Name (Last, First, Middle Initial)

B. Jim Mulhern

Mailing Address 8000 Inverness Ridge Rd.

City State Zip Code
Potomac MD 20854-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.00

Date of Receipt

04 / 15 / 2015

Transaction ID : A497B2A821C884E4AAD8

Amount of Each Receipt this Period

83.00

Full Name (Last, First, Middle Initial)

c. Christopher W. Galen

Mailing Address 3903 Shelley Lane

City State Zip Code
Annandale VA 22003-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Senior Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

04 / 15 / 2015

Transaction ID : AAAB69889833E4B3CAD4

Amount of Each Receipt this Period

30.00

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

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

196.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 8 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. John Hollay

Mailing Address 1021 N. Garfield #222

City

Arlington

State

VA

Zip Code

22201-2555

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Milk Producers Federation

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

04 / 15 / 2015

Transaction ID : A832F5F18B3AF4525ABE

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

B. John Hollay

Mailing Address 1021 N. Garfield #222

City

Arlington

State

VA

Zip Code

22201-2555

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Milk Producers Federation

Occupation

Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

04 / 30 / 2015

Transaction ID : AC430D45DB20F43A7A15

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

c. Christopher W. Galen

Mailing Address 3903 Shelley Lane

City

Annandale

State

VA

Zip Code

22003-2234

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Milk Producers Federation

Occupation

Senior Vice President

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

04 / 30 / 2015

Transaction ID : AFD17CC9A1871461E8A6

Amount of Each Receipt this Period

30.00

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

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

110.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 OF 11
(check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. Jim Mulhern

Mailing Address 8000 Inverness Ridge Rd.

City State Zip Code
Potomac MD 20854-4011

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Chief Operating Officer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A91E73C2F5D95436CAEE

Amount of Each Receipt this Period

83.00

Full Name (Last, First, Middle Initial)

B. Tom M Balmer

Mailing Address 310 Cloverway Drive

City State Zip Code
Alexandria VA 22314-4841

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Executive Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

664.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : A294D4EACC3484F339D2

Amount of Each Receipt this Period

83.00

Full Name (Last, First, Middle Initial)

C. Jamie S. Jonker

Mailing Address 1712 Corcoran Street Nw Apt. 1
Apt 1

City State Zip Code
Washington DC 20009-2415

FEC ID number of contributing
federal political committee.

C

Name of Employer
National Milk Producers Federation

Occupation
Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 30 / 2015

Transaction ID : AD29238978FE54CD6894

Amount of Each Receipt this Period

50.00

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

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

216.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 OF 11
 (check only one)
☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. Peter Vitaliano

Mailing Address 6303 North 28th St

City

Arlington

State

VA

Zip Code

22207-1111

FEC ID number of contributing
federal political committee.

C

Name of Employer

National Milk Producers Federation

Occupation

Vice President

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2015

Transaction ID : A6B0336BE6C9441128E6

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

65.00

785.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. SunTrust Bank

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
04		10		2015

Mailing Address PO Box 62227

City	State	Zip Code
Orlando	FL	32862-2227

Transaction ID : BD9701DE6D11E458C94F

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

29.90

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

--

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City	State	Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

--

Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

29.90
29.90