

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
USA RICE FEDERATION PAC

ADDRESS (number and street) 4301 North Fairfax Drive Suite 425  
 Check if different than previously reported. (ACC)  
Arlington VA 22203

2. **FEC IDENTIFICATION NUMBER** C00308478  
**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 Quarterly 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 (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2009 through 06 30 2009

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 Reece Langley

Signature of Treasurer Electronically Filed by Reece Langley Date 07 29 2009

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**

Write or Type Committee Name  
USA RICE FEDERATION PAC

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		35854.99
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	35854.99									
(c) Total Receipts (from Line 19) .....	33386.28	33386.28								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	69241.27	69241.27								
7. Total Disbursements (from Line 31) .....	66013.49	66013.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3227.78	3227.78								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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)

Write or Type Committee Name  
USA RICE FEDERATION PAC

Report Covering the Period: From:    To:

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) .....	15525.00	15525.00
(ii) Unitemized .....	350.00	350.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	15875.00	15875.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	15000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	30875.00	30875.00
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 .....	2500.00	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	11.28	11.28
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 Transfer (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)) .....	33386.28	33386.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	33386.28	33386.28

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	513.49	513.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	513.49	513.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	65500.00	65500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	66013.49	66013.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	66013.49	66013.49

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 27

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) .....	30875.00	30875.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	30875.00	30875.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	513.49	513.49
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	513.49	513.49

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 27  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 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)  
USA RICE FEDERATION PAC

**A.**

Full Name (Last, First, Middle Initial)  
Robert E. Cummings

Mailing Address 3433 Slade Run Dr.

City Falls Church State VA Zip Code 22042

FEC ID number of contributing federal political committee. **C**

Name of Employer USA Rice Federation Occupation Executive

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 05 / 20 / 2009  
**Transaction ID: SA11AI.5361**  
 Amount of Each Receipt this Period: 500.00

**B.**

Full Name (Last, First, Middle Initial)  
Lori Dabbs

Mailing Address 1501 Grandview Dr

City Stuttgart State AR Zip Code 72160

FEC ID number of contributing federal political committee. **C**

Name of Employer Self Occupation Farmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 01 / 09 / 2009  
**Transaction ID: SA11AI.5345**  
 Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
William Dore

Mailing Address P.O. Box 490

City Crowley State LA Zip Code 70527

FEC ID number of contributing federal political committee. **C**

Name of Employer self Occupation farmer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt: 01 / 09 / 2009  
**Transaction ID: SA11AI.5344**  
 Amount of Each Receipt this Period: 1200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1950.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 27  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**USA RICE FEDERATION PAC**

**A.** Full Name (Last, First, Middle Initial)  
Bobby Hanks

Mailing Address 405 N. Parkerson Ave

City State Zip Code  
Crowley LA 70526

FEC ID number of contributing federal political committee. C

Name of Employer Louisiana Rice Mill      Occupation executive

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      800.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 9

**Transaction ID:** SA11AI.5358

Amount of Each Receipt this Period  
800.00

**B.** Full Name (Last, First, Middle Initial)  
Mollie Hanks

Mailing Address 405 N. Parkerson Ave

City State Zip Code  
Crowley LA 70526

FEC ID number of contributing federal political committee. C

Name of Employer Louisiana Rice Mill      Occupation executive

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 9

**Transaction ID:** SA11AI.5357

Amount of Each Receipt this Period  
5000.00

**C.** Full Name (Last, First, Middle Initial)  
Byron Holmes

Mailing Address P.O. Box 533

City State Zip Code  
Forrest City AR 72336

FEC ID number of contributing federal political committee. C

Name of Employer Self-employed      Occupation Self-employed

Receipt For:      Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼      300.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 3 / 2 3 / 2 0 0 9

**Transaction ID:** SA11AI.5353

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... 5900.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 27  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**USA RICE FEDERATION PAC**

**A.**

Full Name (Last, First, Middle Initial)  
Steven Keith

Mailing Address P.O. Box 2800

City State Zip Code  
**Benton AR 72015**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
KBX, Inc. executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3200.00

Date of Receipt 03 / 06 / 2009

**Transaction ID: SA11AI.5352**

Amount of Each Receipt this Period 3200.00

**B.**

Full Name (Last, First, Middle Initial)  
Mike LaGrande

Mailing Address P.O. Box 8

City State Zip Code  
**Dunnigan CA 95937**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
self farmer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

Date of Receipt 03 / 23 / 2009

**Transaction ID: SA11AI.5356**

Amount of Each Receipt this Period 2100.00

**C.**

Full Name (Last, First, Middle Initial)  
James Warshaw

Mailing Address 3211 Hwy 397

City State Zip Code  
**Lake Charles LA 70615**

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Farmers Rice Milling executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2375.00

Date of Receipt 01 / 30 / 2009

**Transaction ID: SA11AI.5346**

Amount of Each Receipt this Period 2375.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">7675.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;">15525.00</span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 9 / 27</span>
	(check only one)
<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 12	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
USA RICE FEDERATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) FARMERS' RICE COOPERATIVE FUND	Date of Receipt MM / DD / YYYY 03 / 23 / 2009
	Mailing Address P.O. Box 15223	<b>Transaction ID:</b> SA11C.5355
	City State Zip Code Sacramento CA 95851	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>B.</b>	Full Name (Last, First, Middle Initial) LOUISIANA RICE POLITICAL ACTION COMMITTEE INC.	Date of Receipt MM / DD / YYYY 05 / 20 / 2009
	Mailing Address P.O. Box 1691	<b>Transaction ID:</b> SA11C.5362
	City State Zip Code Lake Charles LA 70602	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>C.</b>	Full Name (Last, First, Middle Initial) PRODUCERS RICE MILL INC PAC	Date of Receipt MM / DD / YYYY 02 / 19 / 2009
	Mailing Address P. O. Box 1248	<b>Transaction ID:</b> SA11C.5350
	City State Zip Code Stuttgart AR 72160	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>15000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>15000.00</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 27
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
USA RICE FEDERATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN		Date of Receipt
	Mailing Address PO BOX 3197		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 5 / 0 6 / 2 0 0 9
	City	State	Zip Code
	LITTLE ROCK	AR	72203
	FEC ID number of contributing federal political committee.		Transaction ID: SA16.5363
		Amount of Each Receipt this Period	
		2500.00	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General		Aggregate Year-to-Date ▼	
<input type="checkbox"/> Other (specify) ▼		2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2500.00
<b>TOTAL</b> This Period (last page this line number only) .....	2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 27

<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)  
USA RICE FEDERATION PAC

A.	Full Name (Last, First, Middle Initial) Fees Bank		Transaction ID: SB21B.5342	
	Mailing Address 1011 N Stafford St		Date of Disbursement 06 / 30 / 2009	
	City Arlington	State VA	Zip Code 22201	Amount of Each Disbursement this Period 513.49
	Purpose of Disbursement		Category/ Type	
	Candidate Name			
	Office Sought: <input type="checkbox"/> 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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	513.49
<b>TOTAL</b> This Period (last page this line number only) .....	513.49

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

**A.**

Full Name (Last, First, Middle Initial)  
Bill Cassidy for Congress

**Transaction ID:** SB23.5330  
**Date of Disbursement**

Mailing Address 7668 Goodwood Blvd, Suite A

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	2		2	0	0	9

City State Zip Code  
Baton Rouge LA 70806

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name  
William Cassidy

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

**B.**

Full Name (Last, First, Middle Initial)  
BLAINE FOR CONGRESS 2010

**Transaction ID:** SB23.5304  
**Date of Disbursement**

Mailing Address PO BOX 1526

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	9		2	0	0	9

City State Zip Code  
COLUMBIA MO 65205

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name  
W BLAINE LUETKEMEYER

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: MO District: 09

**C.**

Full Name (Last, First, Middle Initial)  
BLUE DOG POLITICAL ACTION COMMITTEE

**Transaction ID:** SB23.5377  
**Date of Disbursement**

Mailing Address 6849 Old Dominion Drive  
Suite 222

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	4		2	0	0	9

City State Zip Code  
McLean VA 22101

Amount of Each Disbursement this Period

5000.00
---------

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

7000.00
---------

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

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

**A.** Full Name (Last, First, Middle Initial)  
**BOB GOODLATTE FOR CONGRESS COMMITTEE**

Mailing Address P.O. Box 292

City Roanoke State VA Zip Code 24002

Purpose of Disbursement

Candidate Name  
Bob Goodlatte

Office Sought:  House  
 Senate  
 President  
State: VA District: 06

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5317  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
**BOYD FOR CONGRESS**

Mailing Address P.O. Box 15703  
P.O. Box 15703

City Tallahassee State FL Zip Code 32317

Purpose of Disbursement

Candidate Name  
F. A JR. BOYD

Office Sought:  House  
 Senate  
 President  
State: FL District: 02

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5333  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
**BRIGHT FOR CONGRESS.COM**

Mailing Address P.O.Box 2106

City Montgomery State AL Zip Code 36102

Purpose of Disbursement

Candidate Name  
BOBBY NEAL MR. SR. BRIGHT

Office Sought:  House  
 Senate  
 President  
State: AL District: 02

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5371  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

A.	Full Name (Last, First, Middle Initial) CHILDERS FOR CONGRESS	Transaction ID: SB23.5332 Date of Disbursement 05 / 20 / 2009
	Mailing Address PO BOX 177	Amount of Each Disbursement this Period 1000.00
	City BOONEVILLE State MS Zip Code 38829	
	Purpose of Disbursement	Category/Type
	Candidate Name TRAVIS W CHILDERS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) CONAWAY FOR CONGRESS	Transaction ID: SB23.5378 Date of Disbursement 03 / 09 / 2009
	Mailing Address PO Box 51272	Amount of Each Disbursement this Period 1000.00
	City Midland State TX Zip Code 79710	
	Purpose of Disbursement	Category/Type
	Candidate Name K. MICHAEL HON. CONAWAY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) DAN 10	Transaction ID: SB23.5300 Date of Disbursement 03 / 06 / 2009
	Mailing Address 1088 BISHOP STREET SUITE 1009	Amount of Each Disbursement this Period 1500.00
	City HONOLULU State HI Zip Code 96813	
	Purpose of Disbursement	Category/Type
	Candidate Name DANIEL K INOUE	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

A.	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS 2010	Transaction ID: SB23.5295 Date of Disbursement
	Mailing Address 5915 Eastman Avenue Suite 100	<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Midland State MI Zip Code 48640	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name DAVID LEE CAMP	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DAVID SCOTT FOR CONGRESS	Transaction ID: SB23.5308 Date of Disbursement
	Mailing Address P.O. BOX 960821	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City RIVERDALE State GA Zip Code 30296	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name DAVID ALBERT SCOTT	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAVID VITTER FOR US SENATE	Transaction ID: SB23.5298 Date of Disbursement
	Mailing Address PO BOX 8175	<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City METAIRIE State LA Zip Code 70011	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name DAVID VITTER	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

A.	Full Name (Last, First, Middle Initial) BOB ETHERIDGE	Transaction ID: SB23.5309 Date of Disbursement
	Mailing Address PO BOX 28001	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City RALEIGH State NC Zip Code 27611	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name BOB ETHERIDGE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRANK KRATOVIŁ FOR CONGRESS	Transaction ID: SB23.5311 Date of Disbursement
	Mailing Address 222 Main Sail Drive PO Box 518	<input type="text" value="03"/> / <input type="text" value="11"/> / <input type="text" value="2009"/>
	City Stevensville State MD Zip Code 21666	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name FRANK M MR. JR KRATOVIŁ	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER	Transaction ID: SB23.5366 Date of Disbursement
	Mailing Address PO BOX 411176	<input type="text" value="01"/> / <input type="text" value="30"/> / <input type="text" value="2009"/>
	City LOS ANGELES State CA Zip Code 90041	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name BARBARA BOXER	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="4000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

A.	Full Name (Last, First, Middle Initial) FRIENDS OF BENNIE THOMPSON	Transaction ID: SB23.5323 Date of Disbursement 04 / 22 / 2009
	Mailing Address P.O. Box 100 P.O. Box 100	Amount of Each Disbursement this Period 1000.00
	City Bolton State MS Zip Code 39041	
	Purpose of Disbursement	Category/Type
	Candidate Name BENNIE G. THOMPSON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF BLANCHE LINCOLN	Transaction ID: SB23.5329 Date of Disbursement 05 / 06 / 2009
	Mailing Address PO BOX 3197	Amount of Each Disbursement this Period 2500.00
	City LITTLE ROCK State AR Zip Code 72203	
	Purpose of Disbursement refund of contribution after reallocation	Category/Type
	Candidate Name BLANCHE LAMBERT LINCOLN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF CONGRESSMAN TIM HOLDEN	Transaction ID: SB23.5324 Date of Disbursement 05 / 06 / 2009
	Mailing Address 18 N. SECOND STREET PO BOX 37 PO BOX 37	Amount of Each Disbursement this Period 1000.00
	City SAINT CLAIR State PA Zip Code 17970	
	Purpose of Disbursement	Category/Type
	Candidate Name T. TIMOTHY HOLDEN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4500.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DENNIS CARDOZA

Mailing Address PO Box 2749

City Merced State CA Zip Code 95340

Purpose of Disbursement

Candidate Name  
DENNIS CARDOZA

Office Sought:  House  
 Senate  
 President

State: CA District: 18

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5379

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN BARROW

Mailing Address PO Box 8166

City Savannah State GA Zip Code 31412

Purpose of Disbursement

Candidate Name  
JOHN J BARROW

Office Sought:  House  
 Senate  
 President

State: GA District: 12

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5339

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF KENT CONRAD

Mailing Address PO BOX 812

City BISMARCK State ND Zip Code 58502

Purpose of Disbursement

Candidate Name  
GAYLORD KENT CONRAD

Office Sought:  House  
 Senate  
 President

State: ND District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5374

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 27

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

A.

Full Name (Last, First, Middle Initial)  
FRIENDS OF KENT CONRAD

Transaction ID: SB23.5314

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	9

Mailing Address PO BOX 812

Amount of Each Disbursement this Period

1000.00
---------

City State Zip Code  
BISMARCK ND 58502

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name  
GAYLORD KENT CONRAD

Office Sought:  House  Senate  President  
State: ND District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
FRIENDS OF ROSA DELAURO

Transaction ID: SB23.5334

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	0		2	0	0	9

Mailing Address 12 TRUMBULL STREET

Amount of Each Disbursement this Period

1000.00
---------

City State Zip Code  
NEW HAVEN CT 06511

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name  
ROSA DELAURO

Office Sought:  House  Senate  President  
State: CT District: 03

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
GRAVES FOR CONGRESS

Transaction ID: SB23.5310

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	9

Mailing Address 2345 Grand Suite 2400

Amount of Each Disbursement this Period

1000.00
---------

City State Zip Code  
Kansas City MO 64108

Purpose of Disbursement

Category/ Type
-------------------

Candidate Name  
SAMUEL B 'SAM' GRAVES

Office Sought:  House  Senate  President  
State: MO District: 06

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

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

3000.00
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TOTAL This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

<b>A.</b> Full Name (Last, First, Middle Initial) GRIFFITH FOR CONGRESS <hr/> Mailing Address PO BOX 2619 <hr/> City HUNTSVILLE State AL Zip Code 35804 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name R PARKER GRIFFITH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5292 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period <input type="text" value="2500.00"/>
	Category/Type <input type="text"/>
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) JO BONNER FOR CONGRESS COMMITTEE <hr/> Mailing Address P.O.Box 851232 <hr/> City Mobile State AL Zip Code 36685 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name JO BONNER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5380 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 9
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/Type <input type="text"/>
	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) JOHN SALAZAR FOR CONGRESS <hr/> Mailing Address PO Box 534 <hr/> City Pueblo State CO Zip Code 81002 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name JOHN T SALAZAR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.5335 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/Type <input type="text"/>
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text" value="4500.00"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

**A.** Full Name (Last, First, Middle Initial)  
LINCOLN DAVIS FOR CONGRESS

Mailing Address PO Box 350

City State Zip Code  
Jamestown TN 38556

Purpose of Disbursement

Candidate Name  
LINCOLN EDWARD DAVIS

Office Sought:  House  
 Senate  
 President

State: TN District: 04

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5321  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
LUCAS FOR CONGRESS

Mailing Address Post Office Box 1726  
Post Office Box 1726

City State Zip Code  
Oklahoma City OK 73101

Purpose of Disbursement

Candidate Name  
FRANK D. LUCAS

Office Sought:  House  
 Senate  
 President

State: OK District: 03

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5364  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
LUCAS FOR CONGRESS

Mailing Address Post Office Box 1726  
Post Office Box 1726

City State Zip Code  
Oklahoma City OK 73101

Purpose of Disbursement

Candidate Name  
FRANK D. LUCAS

Office Sought:  House  
 Senate  
 President

State: OK District: 03

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5375  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) LUCAS FOR CONGRESS</p> <p>Mailing Address Post Office Box 1726 Post Office Box 1726</p> <p>City Oklahoma City State OK Zip Code 73101</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name FRANK D. LUCAS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 03</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5383</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 2 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <input type="text" value="2000.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) MARION BERRY FOR CONGRESS</p> <p>Mailing Address P.O. BOX 8084 P.O. BOX 8084</p> <p>City JONESBORO State AR Zip Code 72403</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name MARION BERRY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5316</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <input type="text" value="1000.00"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) MARION BERRY FOR CONGRESS</p> <p>Mailing Address P.O. BOX 8084 P.O. BOX 8084</p> <p>City JONESBORO State AR Zip Code 72403</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name MARION BERRY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.5331</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 9</p> <p>Amount of Each Disbursement this Period <input type="text" value="2500.00"/></p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

A.	Full Name (Last, First, Middle Initial) MATSUI FOR CONGRESS	Transaction ID: SB23.5337 Date of Disbursement
	Mailing Address PO BOX 1738	<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City SACRAMENTO State CA Zip Code 95812	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="1000.00"/>
	Candidate Name MATSUI FOR CONGRESS	Category/Type <input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MIKE ROSS FOR CONGRESS COMMITTEE	Transaction ID: SB23.5307 Date of Disbursement
	Mailing Address PO Box 360	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Prescott State AR Zip Code 71857	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="1000.00"/>
	Candidate Name Mike Ross	Category/Type <input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 04	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MORAN FOR KANSAS	Transaction ID: SB23.5293 Date of Disbursement
	Mailing Address P.O. Box 1151	<input type="text" value="02"/> / <input type="text" value="18"/> / <input type="text" value="2009"/>
	City Hays State KS Zip Code 67601	Amount of Each Disbursement this Period
	Purpose of Disbursement <input type="text"/>	<input type="text" value="1000.00"/>
	Candidate Name JERRY MORAN	Category/Type <input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

A.

Full Name (Last, First, Middle Initial)  
MORAN FOR KANSAS

Transaction ID: SB23.5320  
Date of Disbursement

Mailing Address P.O. Box 1151

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	0	9

City Hays State KS Zip Code 67601

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
JERRY MORAN

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: KS District: 01

B.

Full Name (Last, First, Middle Initial)  
NEUGEBAUER CONGRESSIONAL COMMITTEE

Transaction ID: SB23.5318  
Date of Disbursement

Mailing Address P.O. Box 54175

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	0	9

City Lubbock State TX Zip Code 79453

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
RANDY NEUGEBAUER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TX District: 19

C.

Full Name (Last, First, Middle Initial)  
OLSON FOR CONGRESS COMMITTEE

Transaction ID: SB23.5327  
Date of Disbursement

Mailing Address PO Box 16381

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	0	9

City Sugar Land State TX Zip Code 77496

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
PETER G OLSON

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TX District: 22

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

3000.00
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) PETERSON FOR CONGRESS  Mailing Address 26192 Floyd Lake Point Road  City Detroit Lakes State MN Zip Code 56501  Purpose of Disbursement <input type="text"/>  Candidate Name COLLIN C PETERSON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.5303 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 0 9	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
<b>B.</b>	Full Name (Last, First, Middle Initial) PETERSON FOR CONGRESS  Mailing Address 26192 Floyd Lake Point Road  City Detroit Lakes State MN Zip Code 56501  Purpose of Disbursement <input type="text"/>  Candidate Name COLLIN C PETERSON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.5340 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 9 / 2 0 0 9	Amount of Each Disbursement this Period <input type="text" value="1500.00"/>
<b>C.</b>	Full Name (Last, First, Middle Initial) POE FOR CONGRESS  Mailing Address P.O. Box 14222  City Humble State TX Zip Code 77347  Purpose of Disbursement <input type="text"/>  Candidate Name TED POE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.5328 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 6 / 2 0 0 9	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

**A.** Full Name (Last, First, Middle Initial)  
RODNEY ALEXANDER FOR CONGRESS INC.

Mailing Address PO Box 367  
319 NANCY ROAD

City State Zip Code  
Quitman LA 71268

Purpose of Disbursement

Candidate Name  
RODNEY MR. ALEXANDER

Office Sought:  House  Senate  President  
State: LA District: 05

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5382  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
SANFORD D. BISHOP JR. FOR CONGRESS

Mailing Address P. O. Box 909

City State Zip Code  
Columbus GA 31902

Purpose of Disbursement

Candidate Name  
SANFORD D JR. BISHOP

Office Sought:  House  Senate  President  
State: GA District: 02

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5338  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
TEAM EMERSON FOR JO ANN EMERSON

Mailing Address PO BOX 822  
P.O. Box 822

City State Zip Code  
CAPE GIRARDEAU MO 63702

Purpose of Disbursement

Candidate Name  
JOANN EMERSON

Office Sought:  House  Senate  President  
State: MO District: 08

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.5294  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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)  
USA RICE FEDERATION PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) TEAM EMERSON FOR JO ANN EMERSON</p> <p>Mailing Address PO BOX 822 P.O. Box 822</p> <p>City CAPE GIRARDEAU State MO Zip Code 63702</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name JOANN EMERSON Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 08</p>	<p><b>Transaction ID:</b> SB23.5336 <b>Date of Disbursement:</b> 06 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) TEXANS FOR HENRY CUELLAR CONGRESSIONAL CAMPAIGN</p> <p>Mailing Address 1519 Washington Street 2nd Floor Suite 200</p> <p>City Laredo State TX Zip Code 78042</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name HENRY R CUELLAR Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 28</p>	<p><b>Transaction ID:</b> SB23.5381 <b>Date of Disbursement:</b> 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. Box 1500</p> <p>City Chico State CA Zip Code 95927</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name WALLY HERGER Category/Type <input type="checkbox"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 02</p>	<p><b>Transaction ID:</b> SB23.5325 <b>Date of Disbursement:</b> 05 / 06 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> This Period (last page this line number only) .....	65500.00