



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="15207.82"/>	<input type="text" value="15207.82"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="51986.07"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="6500.00"/>	<input type="text" value="73500.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="58486.07"/>	<input type="text" value="88707.82"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="2243.00"/>	<input type="text" value="32464.75"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="56243.07"/>	<input type="text" value="56243.07"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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

**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/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).....	6000.00	45920.00
(ii) Unitemized .....	0.00	3330.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6000.00	49250.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	500.00	24250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6500.00	73500.00
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.....	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))..... ▶	6500.00	73500.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6500.00	73500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	243.00	9464.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	243.00	9464.75
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	23000.00
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)) ..	2243.00	32464.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2243.00	32464.75

**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) .....	6500.00	73500.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6500.00	73500.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	243.00	9464.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	243.00	9464.75

**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 13  
(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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

**A. Kevin Still**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1941 Knightsbridge Rd  
 City Danville State IN Zip Code 46122-7820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cobank Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 20 / 2014  
**Transaction ID : A74BCA0012FB544718B4**  
 Amount of Each Receipt this Period  
 250.00

**B. Clint Roush**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9672 US Highway 183  
 City Arapaho State OK Zip Code 73620-2167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cobank Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : AF897A1525FF743BD8F1**  
 Amount of Each Receipt this Period  
 250.00

**C. David Phippen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13909 Leroy Ave  
 City Ripon State CA Zip Code 95366-9744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cobank Farmer-Owner  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : A57EAF9579F412F8E2**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)  
**A. Catherine Moyer**

Mailing Address **PO Box 125**

City **Ulysses** State **KS** Zip Code **67880-0125**

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

Name of Employer **Cobank** Occupation **Director**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : AF0DFF74930484E4E810**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**B. Mary Fritz**

Mailing Address **PO Box 280**

City **Chester** State **MT** Zip Code **59522-0280**

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

Name of Employer **Cobank** Occupation **Director**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : A66BE2BEFC6274773A29**

Amount of Each Receipt this Period  
**250.00**

Full Name (Last, First, Middle Initial)  
**C. James R Magnuson**

Mailing Address **11698 HWY F 62 E**

City **Sully** State **IA** Zip Code **50251**

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

Name of Employer **Cobank** Occupation **Director**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**05 / 28 / 2014**

**Transaction ID : A6B1BC42F221C4F9289B**

Amount of Each Receipt this Period  
**250.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **750.00**

**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 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

**A. Kevin Riel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cobank Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : A0EE476771AF14D96BEE**  
 Amount of Each Receipt this Period  
 250.00  
 Receipt

**B. Everett Dobrinski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33200 366th St SW  
 City State Zip Code  
 Makoti ND 58756-9569  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cobank Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : A522278D09FC9498684E**  
 Amount of Each Receipt this Period  
 250.00

**C. David L Reinders**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 10001 Melinda Ln  
 City State Zip Code  
 Dumas TX 79029-0000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Cobank Director  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : A92A9D3C1A63D467CAA1**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 750.00  
**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 9 OF 13
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)  
**A. James Kinsey**

Mailing Address RR 1 Box 169

City State Zip Code  
Flemington WV 26347-9720

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

Name of Employer Occupation  
Cobank Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 28 / 2014

**Transaction ID : A30CA18A718D74468AB6**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Robert Behr**

Mailing Address 3009 Shoal Creek Village Dr

City State Zip Code  
Lakeland FL 33803-5425

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

Name of Employer Occupation  
Cobank Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 28 / 2014

**Transaction ID : A636E5532E0524DE5937**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**C. J. Keith Spackler**

Mailing Address PO Box 2047

City State Zip Code  
Omaha NE 68103-2047

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

Name of Employer Occupation  
Ag Processing, Inc. President & CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
05 / 28 / 2014

**Transaction ID : ABFC0B12727534A4F99B**

Amount of Each Receipt this Period  
1500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2000.00

**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 10 OF 13  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

**A. Carl Casale**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1446 Delaware Ave  
 City Saint Paul State MN Zip Code 55118-3000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CHS, Inc. Occupation President & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : AD7A4894523D84725850**  
 Amount of Each Receipt this Period  
 1500.00

**B. Mr. Daniel Kelley**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2633 N Linden St  
 City Normal State IL Zip Code 61761-9404  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Growmark & Cobank Occupation Legislative Asst.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 28 / 2014  
**Transaction ID : ACF1596B37AB54A46BCD**  
 Amount of Each Receipt this Period  
 250.00  
 Receipt

**C.**  
 Full Name (Last, First, Middle Initial)  
 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 M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	6000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:		PAGE 11 OF 13	
(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)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

**A. PCCA Employee's PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 3301 East 50th Street

City Lubbock State TX Zip Code 79404-4331

FEC ID number of contributing federal political committee. **C** C00152272

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 28 / 2014

**Transaction ID : AABC52B811D274FA79D3**

Amount of Each Receipt this Period  
 500.00

Receipt

**B.**

Full Name (Last, First, Middle Initial)  
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

**C.**

Full Name (Last, First, Middle Initial)  
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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	500.00

**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)

<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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)

**A. Suntrust Bank**

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2157

Purpose of Disbursement  
Merchant Services Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 01 / 2014

Transaction ID : **BC3851544A427497C854**

Amount of Each Disbursement this Period

217.16

Full Name (Last, First, Middle Initial)

**B. Suntrust Bank**

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2157

Purpose of Disbursement  
Account Analysis Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
05 / 20 / 2014

Transaction ID : **B8800F919743B42CDA7C**

Amount of Each Disbursement this Period

25.84

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

243.00

243.00

**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)

<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)  
**NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC**

Full Name (Last, First, Middle Initial)

**A. KURT SCHRADER FOR CONGRESS**

Mailing Address PO BOX 3314

City OREGON CITY State OR Zip Code 97045

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Rep. Kurt Schrader**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: OR District: 05

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	4

Transaction ID : **B7F88C7DF317741319A6**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. AUSTIN SCOTT FOR CONGRESS INC**

Mailing Address PO Box 27750

City Macon State GA Zip Code 31221-7750

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Rep. Austin Scott**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: GA District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	4

Transaction ID : **B575C7C00EA244FEE85A**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period


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

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

2	0	0	0	0	0	0	0	0	0

2	0	0	0	0	0	0	0	0	0