

# 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  
**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

ADDRESS (number and street) 2001 K Street, NW  
Suite 400  
 Check if different than previously reported. (ACC) WASHINGTON DC 20006

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00359075

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  
10 / 01 / 2011 through 10 / 31 / 2011

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 Dennis H. Treacy

Signature of Treasurer Dennis H. Treacy [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y  
11 / 07 / 2011

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

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="2011"/>	<input type="text" value="30669.74"/>	<input type="text" value="30669.74"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="51911.81"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="14107.60"/>	<input type="text" value="78132.60"/>
(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="66019.41"/>	<input type="text" value="108802.34"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="22641.13"/>	<input type="text" value="65424.06"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="43378.28"/>	<input type="text" value="43378.28"/>
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

Write or Type Committee Name

**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

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).....	13379.60	76790.60
(ii) Unitemized .....	728.00	1342.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	14107.60	78132.60
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	14107.60	78132.60
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))..... ▶	14107.60	78132.60
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	14107.60	78132.60

**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 .....	141.13	1424.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	141.13	1424.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	49000.00
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 .....	14000.00	15000.00
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)) ..	22641.13	65424.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22641.13	65424.06

**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) .....	14107.60	78132.60
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14107.60	78132.60
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ▶	141.13	1424.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....▶	141.13	1424.06

**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 6 OF 17
<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)  
**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

**A. Michael Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Amesbury Drive

City Plano State TX Zip Code 75093

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

Name of Employer: Armour-Ekrich Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **735.00**

Date of Receipt: **10 / 10 / 2011**

Transaction ID : **SA11Al.7164**

Amount of Each Receipt this Period: **35.00**

Contribution

**B. Michael Brown**  
Full Name (Last, First, Middle Initial)

Mailing Address 3000 Amesbury Drive

City Plano State TX Zip Code 75093

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

Name of Employer: Armour-Ekrich Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **770.00**

Date of Receipt: **10 / 21 / 2011**

Transaction ID : **SA11Al.7171**

Amount of Each Receipt this Period: **35.00**

Contribution

**C. Jeffrey Deel**  
Full Name (Last, First, Middle Initial)

Mailing Address 8 Rollingwood Place

City Newport News State VA Zip Code 23606

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

Name of Employer: Smithfield Foods Occupation: Corporate Controller

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt: **10 / 21 / 2011**

Transaction ID : **SA11Al.7208**

Amount of Each Receipt this Period: **100.00**

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **170.00**

**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 17
	<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	

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NAME OF COMMITTEE (In Full)  
**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

Full Name (Last, First, Middle Initial)  
**A. Russell Dokken**

Mailing Address 637 North 158th Street

City State Zip Code  
Omaha NE 68118

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

Name of Employer Occupation  
John Morrell & Co. National Sales Manager Private Label

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  
10 / 03 / 2011  
**Transaction ID : SA11AI.7153**

Amount of Each Receipt this Period  
3000.00

Contribution

Full Name (Last, First, Middle Initial)  
**B. Michael Flemming**

Mailing Address 1403 Bishop Lane

City State Zip Code  
Alexandria VA 22302

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

Name of Employer Occupation  
Smithfield Foods, Inc. VP & Senior Associate General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
10 / 03 / 2011  
**Transaction ID : SA11AI.7150**

Amount of Each Receipt this Period  
2000.00

Contribution

Full Name (Last, First, Middle Initial)  
**C. Katie Hanigan**

Mailing Address 11500 NW Ambassador

City State Zip Code  
Kansas City MO 64153

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

Name of Employer Occupation  
Farmland Foods VP, Food Safety

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
10 / 14 / 2011  
**Transaction ID : SA11AI.7167**

Amount of Each Receipt this Period  
500.00

Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5500.00

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

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NAME OF COMMITTEE (In Full)  
**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

**A. Roger Kapella**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19005 Alta Vista Drive  
 City Brookfield State WI Zip Code 53045  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Patrick Cudahy Occupation President and COO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 05 / 2011  
**Transaction ID : SA11AI.7154**  
 Amount of Each Receipt this Period 1000.00  
 Contribution

**B. Collette Kaster**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 146 NE 30th Street  
 City Trenton State MO Zip Code 64683  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Farmland Foods, Inc. Occupation VP, Quality Technical Services  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 03 / 2011  
**Transaction ID : SA11AI.7151**  
 Amount of Each Receipt this Period 500.00  
 Contribution

**C. Kevin Keenan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 402 Parkview Way  
 City Newton State PA Zip Code 18940  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Smithfield Global Products Occupation General Manager  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 17 / 2011  
**Transaction ID : SA11AI.7169**  
 Amount of Each Receipt this Period 250.00  
 Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**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 9 OF 17
<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)  
**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

**A. Keira Lombardo**  
Full Name (Last, First, Middle Initial)  
Mailing Address 200 Commerce Street  
City Smithfield State VA Zip Code 23430  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Smithfield Foods Inc. Occupation VP, Investor Relations and Corp Commun  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 21 / 2011  
**Transaction ID : SA11AI.7172**  
Amount of Each Receipt this Period 75.00  
Contribution

**B. Conley J. Nelson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 503 West Keith Street  
City Algona State IA Zip Code 50511  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Murphy-Brown LLC Occupation Operations Manager  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 10 / 2011  
**Transaction ID : SA11AI.7165**  
Amount of Each Receipt this Period 500.00  
Contribution

**C. Gregory P. Schmidt**  
Full Name (Last, First, Middle Initial)  
Mailing Address 512 East Hill Street  
City Warsaw State NC Zip Code 28398  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Murphy-Brown LLC Occupation President - International  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 14 / 2011  
**Transaction ID : SA11AI.7166**  
Amount of Each Receipt this Period 5000.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5575.00  
**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 17
	(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)  
**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

**A. Dennis H. Treacy**  
Full Name (Last, First, Middle Initial)

Mailing Address 8123 Liberty Oaks Lane

City Hanover Courthouse State VA Zip Code 23069

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

Name of Employer Smithfield Foods, Inc. Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4038.30

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 10 / 2011

**Transaction ID : SA11AI.7162**

Amount of Each Receipt this Period  
192.30

Contribution

**B. Dennis H. Treacy**  
Full Name (Last, First, Middle Initial)

Mailing Address 8123 Liberty Oaks Lane

City Hanover Courthouse State VA Zip Code 23069

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

Name of Employer Smithfield Foods, Inc. Occupation VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4230.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 21 / 2011

**Transaction ID : SA11AI.7209**

Amount of Each Receipt this Period  
192.30

Contribution

**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).....▶	384.60
<b>TOTAL</b> This Period (last page this line number only).....▶	13379.60

**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)  
**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

Full Name (Last, First, Middle Initial)

**A. Bank of America**

Mailing Address 303 Main Street

City Smithfield State VA Zip Code 23430

Purpose of Disbursement Bank Fee

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 10 / 17 / 2011

Transaction ID : SB21B.7211

Amount of Each Disbursement this Period: 141.13

Category/Type

Full Name (Last, First, Middle Initial)

**B.**

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

Amount of Each Disbursement this Period

Category/Type

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

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 141.13

**TOTAL** This Period (last page this line number only)..... ▶ 141.13

**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)

**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

Full Name (Last, First, Middle Initial)

**A. DAVID ROUZER FOR CONGRESS**

Mailing Address 442-B EAST MAIN STREET

City State Zip Code  
CLAYTON NC 27520

Purpose of Disbursement  
Contribution

Candidate Name

**DAVID CHESTON ROUZER**

Office Sought:  House  
 Senate  
 President  
State: NC District: 07

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2011

**Transaction ID : SB23.7176**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. MAJORITY COMMITTEE PAC--MC PAC**

Mailing Address P.O. BOX 10134

City State Zip Code  
BAKERSFIELD CA 93389

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 31 / 2011

**Transaction ID : SB23.7205**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. NELSON 2012**

Mailing Address PO BOX 8666

City State Zip Code  
OMAHA NE 68108

Purpose of Disbursement  
Contribution

Candidate Name

**E BENJAMIN NELSON**

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 13 / 2011

**Transaction ID : SB23.7183**

Amount of Each Disbursement this Period

2000.00

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

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

4500.00

**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)

**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

Full Name (Last, First, Middle Initial)

**A. PETERSON FOR CONGRESS**

Mailing Address 26192 Floyd Lake Point Road

City State Zip Code  
Detroit Lakes MN 56501

Purpose of Disbursement  
Contribution

Candidate Name

**COLLIN C PETERSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MN District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2011

**Transaction ID : SB23.7207**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. UPTON FOR ALL OF US**

Mailing Address P.O. BOX 490

City State Zip Code  
ST. JOSEPH MI 49085

Purpose of Disbursement  
Contribution

Candidate Name

**FREDERICK STEPHEN UPTON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: MI District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		13		2011

**Transaction ID : SB23.7179**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. WITTMAN VICTORY FUND**

Mailing Address 1009 WORMLEY CREEK DRIVE

City State Zip Code  
YORKTOWN VA 23692

Purpose of Disbursement  
Contribution

Candidate Name

**ROBERT J WITTMAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: VA District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		13		2011

**Transaction ID : SB23.7187**

Amount of Each Disbursement this Period

1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4000.00
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8500.00
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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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

Full Name (Last, First, Middle Initial)

**A. Brent Jackson for NC Senate**

Mailing Address 2924 Ernest Williams Road

City Autryville State NC Zip Code 28318

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2011			

**Transaction ID : SB29.7196**

Amount of Each Disbursement this Period

4000.00
---------

Full Name (Last, First, Middle Initial)

**B. Citizens for Buck Newton**

Mailing Address P.O. Box 2047

City Wilson State NC Zip Code 27894

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2011			

**Transaction ID : SB29.7200**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. David Lewis for NC House**

Mailing Address PO Box 1826

City Dunn State NC Zip Code 28335

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			14			2011			

**Transaction ID : SB29.7192**

Amount of Each Disbursement this Period

1000.00
---------

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

6000.00
---------

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

Full Name (Last, First, Middle Initial)

**A. Folwell Committee**

Mailing Address P.O. Box 5424

City Winston-Salem State NC Zip Code 27113

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2011

**Transaction ID : SB29.7193**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. Jimmy Dixon for HD4**

Mailing Address P.O. Box 222

City Warsaw State NC Zip Code 28398

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2011

**Transaction ID : SB29.7190**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Larry Bell for NC House**

Mailing Address 908 Southwest Blvd

City Clinton State NC Zip Code 28328

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2011

**Transaction ID : SB29.7195**

Amount of Each Disbursement this Period

1000.00

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

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

4000.00

**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

Full Name (Last, First, Middle Initial)

**A. Louis Pate Committee**

Mailing Address 102 Meredith Street

City State Zip Code  
Mount Olive NC 28365

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2011

**Transaction ID : SB29.7202**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Rabon for Senate**

Mailing Address 404 West Brunswick Street

City State Zip Code  
Southport NC 28461

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2011

**Transaction ID : SB29.7203**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. Wesley Meredith for Senate**

Mailing Address P.O. Box 27398

City State Zip Code  
Fayetteville NC 28314

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2011

**Transaction ID : SB29.7198**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00



**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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**SMITHFIELD FOODS INC POLITICAL ACTION COMMITTEE (HAMPAC)**

Full Name (Last, First, Middle Initial)

**A. William Brisson for NC House**

Mailing Address PO Box 531

City State Zip Code  
Dublin NC 28332

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 14 / 2011

**Transaction ID : SB29.7189**

Amount of Each Disbursement this Period

1000.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Category/  
Type

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) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

Category/  
Type

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

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

1000.00

14000.00