

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM
Jan 30 10 13 AM '97

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Pacific Coast Producers Political Action Committee ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 631 R. Cluff CITY, STATE and ZIP CODE Lodi, CA 95240	2. FEC IDENTIFICATION NUMBER C00245910 3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
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4. TYPE OF REPORT

- (A) April 15 Quarterly Report
 July 15 Quarterly Report
 October 15 Quarterly Report
 January 31 Year End Report
 July 31 Mid Year Report (Non-election Year Only)
 Termination Report
- Monthly Report Due On:
 February 20 June 20 October 20
 March 20 July 20 November 20
 April 20 August 20 December 20
 May 20 September 20 January 31
- Twelfth day report preceding _____
(Type of Election)
 election on _____ in the State of _____
- Thirtieth day report following the General Election on _____
 in the State of _____
- (B) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/26/96</u> through <u>12/31/96</u>		
6. (a) Cash on Hand January 1, 19 <u>96</u>		\$ 9315.07
(b) Cash on Hand at Beginning of Reporting Period	\$ 5011.91	
(c) Total Receipts (from Line 19)	\$ 4657.33	\$ 8029.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 9669.24	\$ 17344.24
7. Total Disbursements (from Line 30)	\$ 1000.00	\$ 8675.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 8669.24	\$ 8669.24
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule G and/or Schedule D)	\$ 0	For further information contact: Federal Election Commission 899 E Street, NW Washington, DC 20483 Toll Free 800-424-9630 Local 202-218-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0	

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 Mark M. Wahlman	Date
Signature of Treasurer 	1/29/97

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 9437g.

DETAILED SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
Pacific Coast Producers Political Action Committee	FROM 11/26/96	TO: 12/31/96	
	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	2294.99	3147.72	11(a)(i)
ii. Unitemized	2362.34	4881.45	11(a)(ii)
iii. Total (add i and ii) >	4657.33	8029.17	11(a)(iii)
b. Political Party Committees	0	0	11(b)
c. Other Political Committees (such as PACs)	0	0	11(c)
d. Total Contributions (add a ii, b and c) >	4657.33	8029.17	11(d)
12. Transfers From Affiliated/Other Party Committees	0	0	12
13. All Loans Received	0	0	13
14. Loan Repayments Received	0	0	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0	0	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0	0	16
17. Other Federal Receipts (Dividends, Interest, etc.)	0	0	17
18. Transfers from Nonfederal Account for Joint Activity	0	0	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4657.33	8029.17	19
20. Total Federal Receipts (subtract line 18 from line 19) >	4657.33	8029.17	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0	0	21(a)(i)
ii. Non-Federal Share	0	0	21(a)(ii)
b. Other Federal Operating Expenditures	0	0	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	0	0	21(c)
22. Transfers to Affiliated/Other Party Committees	0	0	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	4700.00	23
24. Independent Expenditures (use Schedule E)	0	0	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0	0	25
26. Loan Repayments Made	0	0	26
27. Loans Made	0	0	27
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees	0	0	28(a)
b. Political Party Committees	0	0	28(b)
c. Other Political Committees (such as PACs)	0	0	28(c)
d. Total Contribution Refunds (add a, b and c) >	0	0	28(d)
29. Other Disbursements	1000.00	3975.00	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	1000.00	8675.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	1000.00	8675.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	4657.33	8029.17	32
33. Total Contribution Refunds (from line 28d)	0	0	33
34. Net Contributions (other than loans)(subtract line 33 from line 32)	4657.33	8029.17	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0	0	35
36. Offsets to Operating Expenditures (from line 15)	0	0	36
37. Net Operating Expenditures (subtract line 36 from line 35) >	0	0	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 2
FOR LINE NUMBER 11.a.1

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)

Pacific Coast Producers Political Action Committee

A. Full Name, Mailing Address and ZIP Code Mohammed Ayyub 8900 Highway 70 Marysville CA 95901	Name of Employer Self	Date (month, day, year) 12/20/96	Amount of Each Receipt this Period 309.10
	Occupation Grower	Aggregate Year-to-Date > \$ 427.03	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
B. Full Name, Mailing Address and ZIP Code Angelo Di Buduo 5760 Road 24 1/2 Madera CA 93637	Name of Employer Self	Date (month, day, year) 12/20/96	Amount of Each Receipt this Period 258.87
	Occupation Grower	Aggregate Year-to-Date > \$ 448.16	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
C. Full Name, Mailing Address and ZIP Code Maurice Di Buduo 5760 Road 24 1/2 Madera CA 93637	Name of Employer Self	Date (month, day, year) 12/20/96	Amount of Each Receipt this Period 258.86
	Occupation Grower	Aggregate Year-to-Date > \$ 448.15	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
D. Full Name, Mailing Address and ZIP Code Ashley Payne 201 West Monte Ave Woodland CA 95695	Name of Employer Self	Date (month, day, year) 12/20/96	Amount of Each Receipt this Period 463.08
	Occupation Grower	Aggregate Year-to-Date > \$ 726.48	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
E. Full Name, Mailing Address and ZIP Code Martha Button Route 1 Box 206 Winters CA 95695	Name of Employer Self	Date (month, day, year) 12/20/96	Amount of Each Receipt this Period 289.11
	Occupation Grower	Aggregate Year-to-Date > \$ 444.98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
F. Full Name, Mailing Address and ZIP Code Tony Turkovich Route 1 Box 206 Winters CA 95694	Name of Employer Self	Date (month, day, year) 12/20/96	Amount of Each Receipt this Period 289.10
	Occupation Grower	Aggregate Year-to-Date > \$ 444.98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
G. Full Name, Mailing Address and ZIP Code Ernest Gnos 7205 Batavia Road Dixon CA 95620	Name of Employer Self	Date (month, day, year) 12/20/96	Amount of Each Receipt this Period 213.44
	Occupation Grower	Aggregate Year-to-Date > \$ 336.82	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			

SUBTOTAL of Receipts This Page (optional)

2081.56

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER 11.a.i

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NAME OF COMMITTEE (In Full)

Pacific Coast Producers Political Action Committee

A. Full Name, Mailing Address and ZIP Code Herman Gnos 870 West B St Dixon CA 95620	Name of Employer Self	Date (month, day, year) 12/20/96	Amount of Each Receipt this Period 213.43
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation: Grower Aggregate Year-to-Date \$ 336.62	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date \$	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date \$	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date \$	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date \$	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date \$	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date (month, day, year)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Aggregate Year-to-Date \$	

SUBTOTAL of Receipts This Page (optional)	213.43
TOTAL This Period (last page this line number only)	2294.99

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

Pacific Coast Producers Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Assembly Democratic Majority Fund 1014 11th STREET SACRAMENTO CA 95814 930579	Contribution to State PAC Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/12/96	1000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

1000.00

