REPORT OF RECEIPTS AND DISBURSEMENTS

RECEIVED FEDERAL ELECTION COMMISSION MAIL ROOM

For Other Than An Authorized Committee

(Summary Page)

JUL 31 10 06 AM '93

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) AGRICULTURAL PRODUCERS & AFFILIATES SERVICE CORPORATION PAC

ADDRESS (number and street) ☐ Check if different than previously reported
25060 Avenue Stanford, #200

2. FEC IDENTIFICATION NUMBER
C00281444

CITY, STATE and ZIP CODE
Valencia, CA 91355-3446

3. ☐ This committee qualified as a multicandidate committee **DURING THIS** Reporting Period on _____ (date).

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 1/1/93 through 6/30/93		
6. (a) Cash on Hand January 1, 1993		$ -0-
(b) Cash on Hand at Beginning of Reporting Period	$ -0-	
(c) Total Receipts (from Line 19)	$ 3,184.60	$ 3,184.60
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 3,184.60	$ 3,184.60
7. Total Disbursements (from Line 30)	$ 62.45	$
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 3,122.15	$
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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

Signature of Treasurer: L. Jeanne Robbins

Date: 7/27/93

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

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FEC FORM 3X

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE AGRICULTURAL PRODUCERS & AFFILIATES SERVICE CORPORATION PAC

REPORT COVERING PERIOD FROM 1/1/93 TO: 6/30/93

	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)	3,180.00	3,180.00
ii. Unitemized	-0-	-0-
iii. Total (add i and ii) ➤	3,180.00	3,180.00
b. Political Party Committees	-0-	-0-
c. Other Political Committees (such as PACs)	-0-	-0-
d. Total Contributions (add a iii, b and c) ➤	3,180.00	3,180.00
12. Transfers From Affiliated/Other Party Committees	-0-	-0-
13. All Loans Received	-0-	-0-
14. Loan Repayments Received	-0-	-0-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-	-0-
17. Other Federal Receipts (Dividends, Interest, etc.)	4.60	4.60
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	3,184.60	3,184.60
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3,184.60	3,184.60
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	-0-	-0-
ii. Non-Federal Share	-0-	-0-
b. Other Federal Operating Expenditures	62.45	62.45
c. Total Operating Expenditures (add a i, a ii, and b) ➤	62.45	62.45
22. Transfers to Affiliated/Other Party Committees	-0-	-0-
23. Contributions to Federal Candidates/Committees and Other Political Committees	-0-	-0-
24. Independent Expenditures (use Schedule E)	-0-	-0-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-
26. Loan Repayments Made	-0-	-0-
27. Loans Made	-0-	-0-
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	-0-	-0-
b. Political Party Committees	-0-	-0-
c. Other Political Committees (such as PACs)	-0-	-0-
d. Total Contribution Refunds (add a, b and c) ➤	-0-	-0-
29. Other Disbursements	-0-	-0-
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	62.45	62.45
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	62.45	62.45
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	3,180.00	3,180.00
33. Total Contribution Refunds (from line 28d)	-0-	-0-
34. Net Contributions (other than loans)(subtract line 33 from 32)	3,180.00	3,180.00
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	62.45	62.45
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-

7 3 0 3 8 5 2 5 2 7 6

SCHEDULE A ITEMIZED RECEIPTS

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

PAGE 1 OF 2

FOR LINE NUMBER 11a(i)

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)

AGRICULTURAL PRODUCERS & AFFILIATES SERVICE CORPORATION PAC

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Lee C. Bailey 8780 South Anchor Orange Cove, CA 93646 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self Employed Occupation: Grower/Farming Aggregate Year-to-Date > $ 130.00	5/12/93	$130.00
B. Al Bakalian P.O. Box 317 Somis, CA 93066 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Ojai-Tapo Citrus Occupation: General Manager Aggregate Year-to-Date > $ 120.00	5/12/93	$120.00
C. Allen Dangermond 912 Pacific St. Redlands, CA 92373 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self Employed Occupation: Grower Aggregate Year-to-Date > $ 300.00	5/12/93	$300.00
D. Ted Dinkler P.O. Box 68 Lemon Cove, CA 93244 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Kaweah Lemon Occupation: General Manager Aggregate Year-to-Date > $ 300.00	5/12/93	$300.00
E. John Dubendorf P.O. Box 308 Exeter, CA 93221 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Mayflower Fruit Asn Occupation: General Manager Aggregate Year-to-Date > $ 150.00	5/12/93	$150.00
F. Al Friesen 1355 Stanford Upland, CA 91786 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Self Employed Occupation: Grower/Consultant Aggregate Year-to-Date > $ 300.00	5/12/93	$300.00
G. Alfonso Guilin 1141 Cummings Road Santa Paula, CA 93060 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Limoneira Company Occupation: Vice President Aggregate Year-to-Date > $ 240.00	5/12/93	$240.00

SUBTOTAL of Receipts This Page (optional) $1,540.00

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

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CHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2

FOR LINE NUMBER 11a(i)

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NAME OF COMMITTEE (in Full)

AGRICULTURAL PRODUCERS AFFILIATES SERVICE CORPORATION PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Fred LoBue 201 S. Sweetbrier Lindsay, CA 93247	LoBue Bros., Inc.	5/12/93	$240.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: CFO Aggregate Year-to-Date > $240.00		

B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Dennis Myers P.O. Box 11183 Bakersfield, CA 93389-1183	Dole Citrus	5/12/93	$200.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Vice President Aggregate Year-to-Date > $200.00		

C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Frank R. Pritz 440 Anchor Ave. Orange Cove, CA 93646	Harding & Leggett	5/12/93	$240.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: General Manager Aggregate Year-to-Date > $240.00		

D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Eugene J. Shamoon 17429 Palora Encino, CA 91316	Self Employed	5/12/93	$450.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: Grower Aggregate Year-to-Date > $450.00		

E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Paul Story P.O. Box 188 Ivanhoe, CA 93235	Klink Citrus	5/12/93	$120.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: President Aggregate Year-to-Date > $120.00		

F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Al Williams P.O. Box 2800 Visalia, CA 93279	Visalia Citrus Packing Group	5/13/93	$390.00
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation: General Manager Aggregate Year-to-Date > $		

G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Occupation Aggregate Year-to-Date > $		

TOTAL of Receipts This Page (optional)	$1,640
This Period (last page this line number only)	$3,180

SCHEDULE B **ITEMIZED DISBURSEMENTS**

OPERATING EXPENDITURES

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

PAGE 1 OF 1

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (in Full)

AGRICULTURAL PRODUCERS & AFFILIATES SERVICE CORPORATION PAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Bank of America P.O. Box 700 Newhall, CA 91321	Bank Charges (checks etc) Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	6/30/93	$62.45
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

BTOTAL of Disbursements This Page (optional) 62.45

TAL This Period (last page this line number only) .....

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☑	First Class Mail	POSTMARKED 7/27/93
☐	Registered/Certified Mail	POSTMARKED
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

J.A.Q.
PREPARER

7/31/93
DATE PREPARED

FEC FORM 70-2 (12/92)

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