

# 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  
CropLife America POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 1156 15TH STREET NW SUITE 400  
 Check if different than previously reported. (ACC)  
WASHINGTON DC 20005

2. **FEC IDENTIFICATION NUMBER** C00248849  
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 06 01 2007 through 06 30 2007

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 Mr. Jay Vroom

Signature of Treasurer Electronically Filed by Mr. Jay Vroom Date 07 16 2007

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**

Write or Type Committee Name  
CropLife America POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		68740.02
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	82353.02									
(c) Total Receipts (from Line 19) .....	6725.00	54338.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	89078.02	123078.02								
7. Total Disbursements (from Line 31) .....	16500.00	50500.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	72578.02	72578.02								
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**

Write or Type Committee Name  
CropLife America POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	4875.00	44086.00
(i) Itemized (use Schedule A) .....	850.00	7752.00
(ii) Unitemized .....	5725.00	51838.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	1000.00	2500.00
(c) Other Political Committees (such as PACs) .....	6725.00	54338.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....		
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 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)) .....	6725.00	54338.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6725.00	54338.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16500.00	50500.00
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))..	16500.00	50500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	16500.00	50500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	6725.00	54338.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6725.00	54338.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 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

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NAME OF COMMITTEE (In Full)  
CropLife America POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
Gregory Crawford

Mailing Address 410 Traube Ave

City State Zip Code  
Clarendon Hills IL 60514

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

Name of Employer Occupation  
Nufarm President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2007

Transaction ID: SA11A1.7399

Amount of Each Receipt this Period  
1000.00

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jon R Jessen

Mailing Address 4269 W County 12 341-1009

City State Zip Code  
Yuma AZ 85365

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

Name of Employer Occupation  
Gowan Company Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1150.00

Date of Receipt  
MM / DD / YYYY  
06 / 04 / 2007

Transaction ID: SA11A1.7409

Amount of Each Receipt this Period  
150.00

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Jon R Jessen

Mailing Address 4269 W County 12 341-1009

City State Zip Code  
Yuma AZ 85365

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

Name of Employer Occupation  
Gowan Company Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
2900.00

Date of Receipt  
MM / DD / YYYY  
06 / 07 / 2007

Transaction ID: SA11A1.7410

Amount of Each Receipt this Period  
1750.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 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

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NAME OF COMMITTEE (In Full)  
CropLife America POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. William M Mahlborg		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address 3702 W. Colony Square		Transaction ID: SA11A1.7401
City State Zip Code Saint Joseph MO 64506	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>	Contribution	
Name of Employer Occupation Nufarm Americas Inc. Manager of Government Affairs	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Richard Martin		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 0 7 / 2 0 0 7
Mailing Address 1217 West Twelfth Street		Transaction ID: SA11A1.7415
City State Zip Code Kansas City MO 64101	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. <b>C</b>	Contribution	
Name of Employer Occupation PBI-Gordon Corporation President and CEO	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. John Rabby		Date of Receipt M M / D D / Y Y Y Y Y 0 6 / 1 6 / 2 0 0 7
Mailing Address 26 Davis Dr. PO Box 13528		Transaction ID: SA11A1.7402
City State Zip Code Research Triangle NC 27709	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. <b>C</b>	Contribution	
Name of Employer Occupation BASF Corporation Group VP, North American Ag Products	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 2100.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 13
	(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)  
CropLife America POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Devlin W Reynolds		Date of Receipt M M / D D / Y Y Y Y 06 / 22 / 2007	
Mailing Address 1218 Hillside Drive		Transaction ID: SA11A1.7419	
City State Zip Code Gastonia NC 28052	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer Alligare, LLC Occupation Vice President & CFO	Aggregate Year-to-Date ▼ 250.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Daryl D Wiest		Date of Receipt M M / D D / Y Y Y Y 06 / 07 / 2007	
Mailing Address 12508 Ridgeview Dr.		Transaction ID: SA11A1.7413	
City State Zip Code Kearney MO 64060	Amount of Each Receipt this Period 275.00		
FEC ID number of contributing federal political committee. C	Contribution		
Name of Employer FMC Corporation Occupation Manager, Key Accounts	Aggregate Year-to-Date ▼ 275.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	525.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	4875.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 / 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)  
CropLife America POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)  
SYNGENTA CORPORATION POLITICAL ACTION COMMITTEE (SYNGENTA PAC)

Mailing Address 1201 F STREET NW SUITE 875

City State Zip Code  
WASHINGTON DC 20004

FEC ID number of contributing federal political committee. **C** C00363945

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	2	/	2	0	0	7

Transaction ID: SA11C.7422

Amount of Each Receipt this Period  
1000.00

Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

**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)  
CropLife America POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. BOB GOODLATTE FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.7388</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address P.O. Box 292		Amount of Each Disbursement this Period 3000.00
City Roanoke State VA Zip Code 24002	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name ROBERT W GOODLATTE		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CHAMBLISS FOR SENATE</b>		<b>Transaction ID: SB23.7387</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7
Mailing Address PO BOX 12469		Amount of Each Disbursement this Period 2000.00
City ATLANTA State GA Zip Code 30355	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name SAXBY CHAMBLISS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CHAMBLISS FOR SENATE</b>		<b>Transaction ID: SB23.7397</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address PO BOX 12469		Amount of Each Disbursement this Period 1000.00
City ATLANTA State GA Zip Code 30355	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name SAXBY CHAMBLISS		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**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)  
CropLife America POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. CITIZENS FOR HARKIN</b>		Transaction ID: SB23.7398 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7	
Mailing Address P O BOX 811		Amount of Each Disbursement this Period 2000.00	
City DES MOINES	State IA		Zip Code 50304
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name THOMAS RICHARD HARKIN			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IA District: 00			

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JIM MARSHALL</b>		Transaction ID: SB23.7390 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 7	
Mailing Address PO BOX 125		Amount of Each Disbursement this Period 1000.00	
City MACON	State GA		Zip Code 31201
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name JIM MARSHALL			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: GA District: 08			

Full Name (Last, First, Middle Initial) <b>C. GOOD FUND, THE</b>		Transaction ID: SB23.7395 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7	
Mailing Address PO BOX 3404		Amount of Each Disbursement this Period 4000.00	
City ALEXANDRIA	State VA		Zip Code 22302
Purpose of Disbursement Contribution			011 Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<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)

<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)  
CropLife America POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) <b>A. LUCAS FOR CONGRESS</b>		<b>Transaction ID: SB23.7393</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address Post Office Box 1726 Post Office Box 1726		Amount of Each Disbursement this Period 1000.00
City Oklahoma City State OK Zip Code 73101	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name FRANK D LUCAS		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. MARION BERRY FOR CONGRESS</b>		<b>Transaction ID: SB23.7389</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 8 / 2 0 0 7
Mailing Address PO BOX 8084		Amount of Each Disbursement this Period 1000.00
City JONESBORO State AR Zip Code 72403	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name MARION BERRY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NEUGEBAUER CONGRESSIONAL COMMITTEE</b>		<b>Transaction ID: SB23.7394</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address P.O. Box 54175		Amount of Each Disbursement this Period 1000.00
City Lubbock State TX Zip Code 79453	011 Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name RANDY NEUGEBAUER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 19	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<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)

PAGE 13 / 13

<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)  
CropLife America POLITICAL ACTION COMMITTEE

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

Transaction ID: SB23.7391

Date of Disbursement

Mailing Address PO Box 1091

<sup>M</sup> 0	<sup>M</sup> 6	/	<sup>D</sup> 1	<sup>D</sup> 8	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 7
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City Hood River State OR Zip Code 97031

Amount of Each Disbursement this Period

500.00
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Purpose of Disbursement  
Contribution

011
Category/ Type

Candidate Name  
GREGORY PAUL WALDEN

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OR District: 02

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

500.00
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**TOTAL** This Period (last page this line number only) ..... ►

16500.00
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