REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

ADDRESS (number and street) ☐ Check if different than previously reported
111 PONCE DE LEON AVENUE

CITY, STATE and ZIP CODE
CLEWISTON, FLORIDA 33440

2. FEC IDENTIFICATION NUMBER
C00234120

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 5/1/93 through 5/31/93		
6.	(a) Cash on Hand January 1, 19 93		$118,707.05
	(b) Cash on Hand at Beginning of Reporting Period	$ 126,251.22	
	(c) Total Receipts (from Line 19)	$ 3,745.21	$ 19,825.55
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 129,996.43	$138,532.60
7.	Total Disbursements (from Line 30)	$ 9,500.00	$ 18,036.17
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 120,496.43	$120,496.43
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
Stephen V. Coffman

Signature of Treasurer

Date 6/8/93

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

FEC FORM 3X
(revised 11/91)

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

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD FROM 5/1/93 TO: 5/31/93

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	110.00	255.00
ii. Unitemized	3,375.15	18,115.93
iii. Total (add i and ii) ➤	3,485.15	18,370.93
b. Political Party Committees	-	-
c. Other Political Committees (such as PACs)	-	-
d. Total Contributions (add a iii, b and c) ➤	3,485.15	18,370.93
12. Transfers From Affiliated/Other Party Committees	-	-
13. All Loans Received	-	-
14. Loan Repayments Received	-	-
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-	-
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-	-
17. Other Federal Receipts (Dividends, interest, etc.)	260.06	1,454.62
18. Transfers from Nonfederal Account for Joint Activity	-	-
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	3,745.21	19,825.55
20. Total Federal Receipts (subtract line 18 from line 19) ➤	3,745.21	19,825.55
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share	-	-
ii. Non-Federal Share	-	-
b. Other Federal Operating Expenditures	-	1,536.17
c. Total Operating Expenditures (add a i, a ii, and b) ➤	-	1,536.17
22. Transfers to Affiliated/Other Party Committees	-	-
23. Contributions to Federal Candidates/Committees and Other Political Committees	9,500.00	16,500.00
24. Independent Expenditures (use Schedule E)	-	-
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-	-
26. Loan Repayments Made	-	-
27. Loans Made	-	-
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees	-	-
b. Political Party Committees	-	-
c. Other Political Committees (such as PACs)	-	-
d. Total Contribution Refunds (add a, b and c) ➤	-	-
29. Other Disbursements	-	-
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	9,500.00	18,036.17
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	9,500.00	18,036.17
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	3,485.15	18,370.93
33. Total Contribution Refunds (from line 28d)	-	-
34. Net Contributions (other than loans) (subtract line 33 from 32)	3,485.15	18,370.93
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	-	1,536.17
36. Offsets to Operating Expenditures (from line 15)	-	-
37. Net Operating Expenditures (subtract line 36 from 35) ➤	-	1,536.17

SCHEDULE A ITEMIZED RECEIPTS

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* 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: UNITED STATES SUGAR CORPORATION
EMPLOYEE STOCK OWNERSHIP PLAN
POLITICAL ACTION COMMITTEE, INC. C00234120

FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE	AMOUNT OF EACH RECEIPT THIS PERIOD
GREGORY C FORD 267 CALOOSA ESTATES DRIVE LABELLE ,FL 33935 OCCUPATION: DIRECTOR AGGREGATE YEAR-TO-DATE: $200.00	U.S. SUGAR CORP.	MONTHLY PAYROLL DEDUCTION	$40.00 ($40.00 PER PAY PERIOD)
EUGENE F HOLLON P. O. BOX 655 305 EVERGLADES AVE. CANAL POINT ,FL 33438 OCCUPATION: SUPERINTENDENT AGGREGATE YEAR-TO-DATE: $250.00	U.S. SUGAR CORP.	MONTHLY PAYROLL DEDUCTION	$50.00 ($50.00 PER PAY PERIOD)
JORGE L RIVAS 924 S. E. 3 RD ST. BELLE GLADE ,FL 33430 OCCUPATION: ASST.SUPT.HARV. AGGREGATE YEAR-TO-DATE: $265.00	U.S. SUGAR CORP.	MONTHLY PAYROLL DEDUCTION	$20.00 ($20.00 PER PAY PERIOD)

TOTAL OF INDIVIDUAL CONTRIBUTIONS FOR THIS REPORTING PERIOD WHICH ARE GREATER THAN OR EQUAL TO $200.00 . $110.00

TOTAL OF INDIVIDUAL CONTRIBUTIONS FOR THIS REPORTING PERIOD WHICH ARE LESS THAN $200.00 . $3,375.15

GRAND TOTAL FOR REPORTING PERIOD 05/01/1993 THRU 05/31/1993 $3,485.15

GRAND TOTAL FOR THE YEAR (ALL EMPLOYEES): $18,370.93

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full): UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. FIRST BANK OF CLEWISTON P. O. BOX 1237 CLEWISTON, FL 33440 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	(INTEREST RECEIVED FROM HI-FI ACCOUNT) Occupation Aggregate Year-to-Date > $ 1,454.62	REPORTING PERIOD	$260.06
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	$260.06

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code CONGRESSMAN KILDEE COMMITTEE 2239 RAYBURN HOUSE OFFICE BLDG. WASHINGTON, D. C. 20515	Purpose of Disbursement CONTRIBUTION TO RE-ELECT DALE K. KILDEE TO HSE OF REP. 7/MICHIGAN Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 5/17/93	Amount of Each Disbursement This Period $500.00
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

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

TOTAL This Period (last page this line number only) $500.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code COMMITTEE FOR CONG. CHARLIE ROSE P. O. BOX 1891 FAYETTEVILLE, NC 28302	Purpose of Disbursement CONTRIBUTION TO RE-ELECT CHARLIE ROSE TO HSE. OF REP. 7/NORTH CAROLINA Disbursement for: X Primary ___ General ___ Other (specify)	Date (month, day, year) 5/17/93	Amount of Each Disbursement This Period $500.00
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

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

TOTAL This Period (last page this line number only) $500.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code ESPY FOR CONGRESS P. O. BOX 353 CLARKSDALE, MS 38614	Purpose of Disbursement CONTRIBUTION FOR ELECTION DEBT FOR HENRY ESPY 2/MISSISSIPPI Disbursement for: [ ] Primary [ ] General [X] Other (specify) ELECTION DEBT	Date (month, day, year) 5/17/93	Amount of Each Disbursement This Period $1,000.00
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
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SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$1,000.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code BARBARA BOXER CAMPAIGN FUND P. O. BOX 641751 LOS ANGELES, CA 90064	Purpose of Disbursement CONTRIBUTION TO ELECT BARBARA BOXER TO SENATE CALIFORNIA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 5/17/93	Amount of Each Disbursement This Period $1,000.00
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
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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

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$1,000.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1 FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code COLLIN PETERSON CAMPAIGN FUND P. O. BOX 265 DETROIT LAKES, MN 56502	Purpose of Disbursement CONTRIBUTION TO ELECT COLLIN PETERSON TO HSE OF REP. 7/MINNESOTA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 5/17/93	Amount of Each Disbursement This Period $500.00
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

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$500.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code KENT CONRAD CAMPAIGN FUND 236 MASSACHUSETTS AVENUE, NE SUITE 202 WASHINGTON, D. C. 20002	Purpose of Disbursement CONTRIBUTION TO RE-ELECT KENT CONRAD TO SENATE N. DAKOTA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 5/17/93	Amount of Each Disbursement This Period $1,000.00
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

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$1,000.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code DEMOCRATIC CONGRESSIONAL DINNER COMM. P. O. BOX 2884 WASHINGTON, D. C. 20013	Purpose of Disbursement CONTRIBUTION TO DEMOCRATIC NATIONAL COMM. Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year) 5/4/93	Amount of Each Disbursement This Period $1,500.00
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

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$1,500.00

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 1
	FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full): UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. CLAY SHAW CAMPAIGN FUND 3869 BEECH DOWN DRIVE CHANTILLY, VA 22021-3348	CONTRIBUTION TO RE-ELECT CLAY SHAW TO HSE OF REP. 22/FLORIDA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/17/93	$500.00
B. PETE PETERSON CAMPAIGN FUND P. O. BOX 990 WASHINGTON, D. C. 20044-0990	CONTRIBUTION TO RE-ELECT PETE PETERSON TO HSE OF REP. 2/FLORIDA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/17/93	$500.00
C. TOM LEWIS CAMPAIGN FUND P. O. BOX 14749 NO. PALM BEACH, FL 33408	CONTRIBUTION TO RE-ELECT TOM LEWIS TO HSE OF REP. 16/FLORIDA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/17/93	$500.00
D. MIKE BILIRAKIS CAMPAIGN FUND 1850 I STREET, NW, S-870 WASHINGTON, D. C. 20005	CONTRIBUTION TO RE-ELECT MIKE BILIRAKIS TO HSE OF REP 9/FLORIDA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/17/93	$500.00
E. CLIFF STEARNS CAMPAIGN FUND 4010 FRANCONIA ROAD ALEXANDRIA, VA 22310-2136	CONTRIBUTION TO RE-ELECT CLIFF STEARNS TO HSE OF REP. 6/FLORIDA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/17/93	$500.00
F. BILL MCCOLLUM CAMPAIGN FUND 790 NO. VERMONT STREET ARLINGTON, VA 22203	CONTRIBUTION TO RE-ELECT BILL MCCOLLUM TO HSE. OF REP. 8/FLORIDA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/17/93	$500.00
G. CONNIE MACK CAMPAIGN FUND 517 HART SENATE OFFICE BLDG. WASHINGTON, D. C. 20510	CONTRIBUTION TO RE-ELECT CONNIE MACK TO SENATE FLORIDA Disbursement for: [X] Primary [ ] General [ ] Other (specify)	5/27/93	$500.00
H.	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I.	Purpose of Disbursement Disbursement for [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	$3,500.00

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
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☐	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

S.L.S.
PREPARER

6-14-93
DATE PREPARED

FEC FORM 70-2 (12/92)