REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 OCT 24 A 11:31

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
American Association of Crop Insurers Political Action Committee

ADDRESS (number and street) ☐ Check if different than previously reported
One Massachusetts Ave. NW #800

CITY, STATE and ZIP CODE
Washington, DC 20001

2. FEC IDENTIFICATION NUMBER
C 00172833

a. ☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1 M)

3. 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

☒ 12-Day Pre-Election Report for the GENERAL (Type of Election)
election on _____ in the State of _____

☐ 30-Day Post-Election 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 October 1, 2000 through October 18, 2000		
6. (a) Cash on Hand January 1, 2000		$ 33,398.83
(b) Cash on Hand at Beginning of Reporting Period	$ 12,000.04	
(c) Total Receipts (from Line 19)	$ 16,110.00	$ 52,082.58
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 28,766.64	$ 85,481.39
7. Total Disbursements (from Line 30)	$ 1,000.00	$ 57,714.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 27,766.64	$ 27,766.64
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: Michael R. McLeod

Signature of Treasurer: Michael R. McLeod

Date: October 23, 2000

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 6/93)

FCPA1047PDF

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

(revised 1/1/91)

NAME OF COMMITTEE American Association of Crop Insurers Political Action Committee

REPORT COVERING PERIOD FROM: October 1, 2000 TO: October 18, 2000

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)	5,295.00	13,045.00	11(a)(i)(i)
ii. Unitemized	7,815.00	27,380.00	11(a)(ii)(i)
iii. Total (add i and ii) >	13,110.00	40,425.00	11(a)(iii)(i)
b. Political Party Committees	0.00	0.00	11(b)
c. Other Political Committees (such as PACs)	3,000.00	8,000.00	11(c)
d. Total Contributions (add a iii,b and c)>	16,110.00	48,425.00	11(d)
12. Transfers From Affiliated/Other Party Committees	0.00	0.00	12
13. All Loans Received	0.00	0.00	13
14. Loan Repayments Received	0.00	0.00	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	0.00	0.00	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	0.00	3,000.00	16
17. Other Federal Receipts (Dividends, Interest, etc.) (interest)	0.00	657.58	17
18. Transfers from Nonfederal Account for Joint Activity	0.00	0.00	18
19. Total Receipts (add 11d,12,13,14,15,16,17,and 18)>	16,110.00	52,082.58	19
20. Total Federal Receipts (subtract line 18 from line 19) >	16,110.00	52,082.58	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	0.00	0.00	21(a)(i)
ii. Non-Federal Share	0.00	0.00	21(a)(ii)
b. Other Federal Operating Expenditures	0.00	0.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b)>	0.00	0.00	21(c)
22. Transfers to Affiliated/Other Party Committees	0.00	0.00	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,000.00	57,362.04	23
24. Independent Expenditures (use Schedule E)	0.00	0.00	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00	25
26. Loan Repayments Made	0.00	0.00	26
27. Loans Made	0.00	0.00	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	0.00	0.00	28(a)
b. Political Party Committees	0.00	0.00	28(b)
c. Other Political Committees (such as PACs)	0.00	0.00	28(c)
d. Total Contribution Refunds (add a, b and c) >	0.00	0.00	28(d)
29. Other Disbursements (taxes and bank charges)	0.00	352.71	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	0.00	57,714.75	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	1,000.00	57,714.75	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	16,110.00	48,425.00	32
33. Total Contribution Refunds (from line 28d)	0.00	0.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	16,110.00	48,425.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	0.00	0.00	35
36. Offsets to Operating Expenditures (from line 15)	0.00	0.00	36
37. Net Operating Expenditures (subtract line 36 from 35) >	0.00	0.00	37

FE7AN037PDF

SCHEDULE A ITEMIZED RECEIPTS

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

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)

American Association of Crop Insurers Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Nickey Smith 312 N Houston Ave Lamesa, TX 79331 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Southern Crop Insurance Occupation: Owner Aggregate Year to Date: $505.00	10/6/00	$505.00
B. Rod MacNeill PO Box 388 Williamston, NC 27871 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Harrison-Crawford-Manning-Sparrow Ag Ins Occupation: Agent Aggregate Year-to-Date: $245.00	10/12/00	$245.00
C. Sherry Lynn Wegner PO Box 3550 Big Springs, TX 79721-3550 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Sherry Wegner Agency Occupation: Owner Aggregate Year-to-Date: $350.00	10/17/00	$300.00
D. Gary A. Yockey 113 S. Main St. Holstein, IA 51025 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	IGF Insurance Occupation: Agent Aggregate Year-to-Date: $500.00	10/17/00	$500.00
E. Chisholm Downs 1993 Highway 31 S Athens, AL 35611 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	D & D Agri-Insurance Occupation: Owner Aggregate Year-to-Date: $405.00	10/17/00	$300.00
F. Dennis G. Daggett 2262 Carver Rd. Winterset, IA 50273 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	IGF Insurance Company Occupation: President Aggregate Year-to-Date: $495.00	10/17/00	$250.00
G. Charlotte A. Davis County Road #1 Amboy, MN 56010 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Marketing Link Insurance Occupation: President Aggregate Year-to-Date: $250.00	10/17/00	$250.00

SUBTOTAL of Receipts This Page (optional) $2,350.00

TOTAL This Period (last page this line number only)

FE7AN047PDF

SCHEDULE A ITEMIZED RECEIPTS

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

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)

American Association of Crop Insurers Political Action Committee

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Monte D. Johnson PO Box 128 Tulelake, CA 96134 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	IGF Insurance Agent Aggregate Year-to-Date	10/17/00 $250.00	$250.00
B. Tom Horton 200 Frankfort Street Versailles, KY 40383 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	IGF Insurance Agent Aggregate Year-to-Date	10/17/00 $1,000.00	$1,000.00
C. Loran Schultz 3244 H Ave Earlham, IA 50072 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Central Crop Agent Aggregate Year-to-Date	10/17/00 $400.00	$400.00
D. James E. Van Camp 319 South Coteau Pierre, SD 57501 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	W.N. Van Camp Co. President Aggregate Year-to-Date	10/17/00 $300.00	$300.00
E. Tracy Hawker PO Box 6 Twin Falls, ID 83303 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	McDonald Crop Insurance Agent Aggregate Year-to-Date	10/17/00 $300.00	$300.00
F. Ronald W. Sparrow 309 W Main St Robersonville, NC 27871 Receipt For: ☐ Primary ☒ General ☐ Other (specify):	Harrison-Crawford-Manning Agent Aggregate Year-to-Date	10/17/00 $245.00	$245.00
G. Thomas F. Gowdy 8400 Barnham Johnston, IA 50131 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	IGF Insurance President Aggregate Year-to-Date	10/17/00 $595.00	$200.00

SUBTOTAL of Receipts This Page (optional) $2,695.00

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

FE7AMDATPDF

SCHEDULE A

ITEMIZED RECEIPTS

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

FOR LINE NUMBER 11.a.i.

Any information copied from such Reports and Statements may not be sold or used by any person for the purposes 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)

American Association of Crop Insurers Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Mark Weiler 503 5th - Box 130 Syracuse, NE 68446 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Granneman Agency, Inc. Occupation: Agent/Owner Aggregate Year-to-Date: $395.00	10/6/00	$130.00
B. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Ben Springer PO Box 406 - 823 North Section St. Sullivan, IN 47882 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Springer Insurance Occupation: President Aggregate Year-to-Date: $295.00	10/11/00	$100.00
C. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		
D. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		
E. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date		

SUBTOTAL of Receipts This Page (optional)	$250.00
TOTAL This Period (last page this line number only)	$5,295.00

FETAN047PDF

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER 23

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)

American Association of Crop Insurers Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Feinstein 2000 (Diane Feinstein) PO Box 75156 Washington, DC 20013	Senate / CA Disbursement for: ☐ Primary ☒ General ☐ Other (specify)	10/4/00	$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)	$1,000.00
TOTAL This Period (last page this line number only)	$1,000.00

FE7AND47PDF

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 10-24-00
☐	First Class Mail	POSTMARKED
☐	Registered/Certified Mail	POSTMARKED (R/C)
☐	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
☐	Electronic Filing	

[signature] PREPARER

10-24-00 DATE PREPARED

(6/2000)