

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
ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

ADDRESS (number and street) P.O. BOX 455 315 NORTH BROADWAY
 Check if different than previously reported. (ACC)
NEW ULM MN 56073

2. **FEC IDENTIFICATION NUMBER** C00330696
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 08 01 2008 through 08 31 2008

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 Sheryl Doering Meshke
Signature of Treasurer Electronically Filed by Sheryl Doering Meshke Date 09 15 2008

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		361327.14
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	380220.87									
(c) Total Receipts (from Line 19)	3927.34	45854.04								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	384148.21	407181.18								
7. Total Disbursements (from Line 31)	4707.76	27740.73								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	379440.45	379440.45								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	290.00	3607.81
(i) Itemized (use Schedule A)	3616.06	31672.76
(ii) Unitemized	3906.06	35280.57
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3906.06	35280.57
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.)	21.28	10573.47
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))	3927.34	45854.04
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3927.34	45854.04

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	501.26	11534.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	501.26	11534.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	16000.00
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.....	206.50	206.50
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))..	4707.76	27740.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4707.76	27740.73

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	3906.06	35280.57
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3906.06	35280.57
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	501.26	11534.23
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	501.26	11534.23

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 11

(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

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)
ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Ron Durst

Mailing Address RR 1 Box 189

City State Zip Code
Kasson MN 55944

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation
Self Employed Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 20 / 2008

Transaction ID: SA11AI.5891

Amount of Each Receipt this Period 50.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
Ronald L Guenther

Mailing Address 1540 Hwy 51

City State Zip Code
Bancroft NE 68004

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation
Self Employed Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 08 / 20 / 2008

Transaction ID: SA11AI.5893

Amount of Each Receipt this Period 50.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
Thomas Jandt

Mailing Address N3449 County Road M

City State Zip Code
West Salem WI 54669

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation
Self Employed Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 208.93

Date of Receipt 08 / 20 / 2008

Transaction ID: SA11AI.5897

Amount of Each Receipt this Period 5.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 105.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 11
(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)
ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Philip J Johnson

Mailing Address N7232 County Road D

City State Zip Code
Holmen WI 54636

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation
Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt 08 / 20 / 2008
Transaction ID: SA11AI.5898

Amount of Each Receipt this Period
20.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Bruce W Maas

Mailing Address 16659 200 Street

City State Zip Code
Walnut Grove MN 56073

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation
Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 295.00

Date of Receipt 08 / 20 / 2008
Transaction ID: SA11AI.5896

Amount of Each Receipt this Period
15.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Desmond Miller

Mailing Address 44985 281ST Street

City State Zip Code
Parker SD 57053

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation
Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 398.88

Date of Receipt 08 / 20 / 2008
Transaction ID: SA11AI.5895

Amount of Each Receipt this Period
15.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 50.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 11
(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)
ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Joel and/or Sarah Pettit

Mailing Address 15361 440th Street

City State Zip Code
Zumbrota MN 55992

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

Name of Employer Self Employed Occupation Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.5890

Amount of Each Receipt this Period
55.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
Bill Rowekamp

Mailing Address Rt 2 Box 13

City State Zip Code
Lewiston MN 55952

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

Name of Employer Self Employed Occupation Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.5892

Amount of Each Receipt this Period
50.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
Dan and or Jim Thyen

Mailing Address Box 49

City State Zip Code
Waverly SD 57202

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

Name of Employer Self Employed Occupation Dairy Farmer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 8 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.5894

Amount of Each Receipt this Period
30.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 135.00

TOTAL This Period (last page this line number only) ► 290.00

**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)

PAGE 9 / 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) AMPI			Transaction ID: SB21B.5901	
	Mailing Address P.O. Box 455 315 North Broadway			Date of Disbursement 08 / 29 / 2008	
City New Ulm		State MN	Zip Code 56073		Amount of Each Disbursement this Period 501.26
Purpose of Disbursement AUG-08 OPERATING EXPENSES			Category/ Type		
Candidate Name			Disbursement For:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					

SUBTOTAL of Disbursements This Page (optional)	501.26
TOTAL This Period (last page this line number only)	501.26

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)
ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Coleman for US Senate 08</p> <p>Mailing Address 7300 Hudson Blvd Suite 270A</p> <p>City St Paul State MN Zip Code 55128</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Coleman for US Senate 08</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5904</p> <p>Date of Disbursement 08 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Johanns for US Senate</p> <p>Mailing Address 2819 S 125TH Avenue Suite 362</p> <p>City Omaha State NE Zip Code 68144</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Johanns for US Senate</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5906</p> <p>Date of Disbursement 08 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Tim Walz for US Congress</p> <p>Mailing Address P O Box 938</p> <p>City Mankato State MN Zip Code 56002</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name Tim Walz for US Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.5903</p> <p>Date of Disbursement 08 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	4000.00

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)

PAGE 11 / 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ASSOCIATED MILK PRODUCERS INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Aramark

Transaction ID: SB29.5908

Date of Disbursement

Mailing Address 22485 Network Place

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	0	8

City	State	Zip Code
Chicago	IL	60673-1224

Amount of Each Disbursement this Period

206.50

Purpose of Disbursement
Awards Shirts Education Expense

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

206.50

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

206.50
