

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

ADDRESS (number and street) 50 F Street NW Suite 900 Washington DC 20001

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00002238

3. IS THIS REPORT [X] 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 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

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 / 2014 through 06 / 30 / 2014

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 Miss Kelsey A Swango

Signature of Treasurer Miss Kelsey A Swango [Electronically Filed] Date 07 / 18 / 2014

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

Table with 10 columns for Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2014"/> | <input type="text" value="15207.82"/> | <input type="text" value="15207.82"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="56243.07"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="10170.00"/> | <input type="text" value="83670.00"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="66413.07"/> | <input type="text" value="98877.82"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="4567.56"/> | <input type="text" value="37032.31"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="61845.51"/> | <input type="text" value="61845.51"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Report Covering the Period: From: / / To: / /

| 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 | | |
| (i) Itemized (use Schedule A)..... | 4630.00 | 50550.00 |
| (ii) Unitemized | 540.00 | 3870.00 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 5170.00 | 54420.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 5000.00 | 29250.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 10170.00 | 83670.00 |
| 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 Transfers (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))..... ▶ | 10170.00 | 83670.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 10170.00 | 83670.00 |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated 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 | 67.56 | 9532.31 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 67.56 | 9532.31 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 4500.00 | 27500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (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) Allocated 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)) .. | 4567.56 | 37032.31 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 4567.56 | 37032.31 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| 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) | 10170.00 | 83670.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 10170.00 | 83670.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 67.56 | 9532.31 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 67.56 | 9532.31 |

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

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

FOR LINE NUMBER: PAGE 6 OF 18
(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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)
A. Benjamin Freund

Mailing Address 326 Norfolk Road

| | | |
|---------------------|-------------|------------------------|
| City East Canaan | State CT | Zip Code 06024-2631 |
|---------------------|-------------|------------------------|

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

| | |
|----------------------------|------------------------|
| Name of Employer Cobank | Occupation Director |
|----------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 06 | / | 2014 |

Transaction ID : A2BF9073755CE4CF7A1C

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Stephanie Herseth Sandlin

Mailing Address 900 W White Willow Cir

| | | |
|---------------------|-------------|------------------------|
| City Sioux Falls | State SD | Zip Code 57108-2881 |
|---------------------|-------------|------------------------|

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

| | |
|----------------------------|------------------------|
| Name of Employer Cobank | Occupation Director |
|----------------------------|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 06 | / | 2014 |

Transaction ID : ADD84E957B436494590D

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C. Richard Sitman

Mailing Address 172 Crooked Creek Rd

| | | |
|------------------|-------------|------------------------|
| City Kentwood | State LA | Zip Code 70444-7873 |
|------------------|-------------|------------------------|

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

| | |
|---|------------------------|
| Name of Employer Information Requested | Occupation Director |
|---|------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 06 | / | 2014 |

Transaction ID : A9EA6C1E8F91C4DA3A65

Amount of Each Receipt this Period
250.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 750.00 |
| 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: (check only one) | PAGE 7 OF 18 |
| | <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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Scott Whittington
Full Name (Last, First, Middle Initial)

Mailing Address 1106 Sage Busch Ct

City Burlington State KS Zip Code 66839

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

Name of Employer Lyon-Coffey Electric Coop Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 06 / 2014
Transaction ID : A0F46869A5CD14457AD7

Amount of Each Receipt this Period
250.00

B. David Kragnes
Full Name (Last, First, Middle Initial)

Mailing Address 10600 60th St N

City Felton State MN Zip Code 56536-9330

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

Name of Employer Cobank Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 06 / 2014
Transaction ID : A8C6EE3B623894E45A22

Amount of Each Receipt this Period
250.00

C. Barry Sabloff
Full Name (Last, First, Middle Initial)

Mailing Address 280 White Oak Ln

City Winnetka State IL Zip Code 60093-3630

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

Name of Employer Cobank Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
06 / 06 / 2014
Transaction ID : A44E812751EF74AEF8FF

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)
A. Robert Engel

Mailing Address 988 Preston Ct

City Castle Rock State CO Zip Code 80108-9176

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

Name of Employer Cobank Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1560.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : AED8256A890D24F18858

Amount of Each Receipt this Period
 60.00

Full Name (Last, First, Middle Initial)
B. Greg Wickham

Mailing Address 8369 Vassar Dr

City Manlius State NY Zip Code 13104-9425

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

Name of Employer Dairylea Cooperative, Inc. Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1020.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : AD91D9BA3DD8F4F9AB3B

Amount of Each Receipt this Period
 20.00

Full Name (Last, First, Middle Initial)
C. Todd VanHoose

Mailing Address 606 Kings Cloister Cir

City Alexandria State VA Zip Code 22302-4000

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

Name of Employer Cobank Occupation Senior Vice President, Government Affa

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 220.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : AE17E68E1079E482AA48

Amount of Each Receipt this Period
 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 100.00

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 9 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Charles F. Conner
 Full Name (Last, First, Middle Initial)
 Mailing Address 310 Mansion Dr
 City Alexandria State VA Zip Code 22302-2903
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Council Of Farmer Cooperative Occupation President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 870.00

Date of Receipt 06 / 13 / 2014
Transaction ID : A235D732988AF437BB12
 Amount of Each Receipt this Period 80.00

B. Everett Dobrinski
 Full Name (Last, First, Middle Initial)
 Mailing Address 33200 366th St SW
 City Makoti State ND Zip Code 58756-9569
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Cobank Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt 06 / 13 / 2014
Transaction ID : AA9E296043B0949A89C5
 Amount of Each Receipt this Period 40.00

C. Christopher Policinski
 Full Name (Last, First, Middle Initial)
 Mailing Address PO Box 64101
 City Saint Paul State MN Zip Code 55164-0101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Land O' Lakes, Inc Occupation CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1520.00

Date of Receipt 06 / 13 / 2014
Transaction ID : A69BA88E2098E425D861
 Amount of Each Receipt this Period 20.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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: (check only one) | PAGE 10 OF 18 |
| <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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Charles Adami
Full Name (Last, First, Middle Initial)

Mailing Address 14126 Hillcrest Dr

| | | |
|------|-------|----------|
| City | State | Zip Code |
| Lodi | WI | 53555 |

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

| | |
|--|----------------|
| Name of Employer | Occupation |
| Equity Cooperative Livestock Sales Ass | President & Co |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 13 | / | 2014 |

Transaction ID : A6756CBDE02A44FE3B7C

Amount of Each Receipt this Period

| |
|-------|
| 40.00 |
|-------|

B. Jeffery Solberg
Full Name (Last, First, Middle Initial)

Mailing Address 1806 Crimson Ln

| | | |
|-------------|-------|------------|
| City | State | Zip Code |
| Bloomington | IL | 61704-2735 |

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

| | |
|------------------|------------|
| Name of Employer | Occupation |
| Growmark, Inc. | CEO |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2040.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 13 | / | 2014 |

Transaction ID : AB442E68C604A46EE89E

Amount of Each Receipt this Period

| |
|-------|
| 40.00 |
|-------|

C. Lisa Kelley
Full Name (Last, First, Middle Initial)

Mailing Address 609 Constitution Ave NE

| | | |
|------------|-------|------------|
| City | State | Zip Code |
| Washington | DC | 20002-6035 |

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

| | |
|--|--|
| Name of Employer | Occupation |
| National Council Of Farmer Cooperative | Vice President & Chief of Staff to Gov |

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2300.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 13 | / | 2014 |

Transaction ID : AD84D96531FDF4D03B0A

Amount of Each Receipt this Period

| |
|--------|
| 200.00 |
|--------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 280.00 |
| 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: (check only one) | PAGE 11 OF 18 |
| | <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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Jackie Klippenstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 15945 Hh Hwy
 City State Zip Code
 Platte City MO 64079-9198
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Dairy Farmers Of America Vice President, Legislative & Industry
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : A4663949861EF49ACAC0
 Amount of Each Receipt this Period
 100.00

B. Robert B Krisle
 Full Name (Last, First, Middle Initial)
 Mailing Address 127 Briarwood Dr
 City State Zip Code
 Greenbrier TN 37073-5258
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Tennessee Farmers Cooperative CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2430.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : A02D2E2E8D6014FE3870
 Amount of Each Receipt this Period
 120.00

C. Gary A Swango
 Full Name (Last, First, Middle Initial)
 Mailing Address 2102 Berrywood Ln
 City State Zip Code
 Bloomington IL 61704-2437
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Growmark, Inc. VP, Human Resources and Compliance
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1145.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : A886AC9374F6343DB954
 Amount of Each Receipt this Period
 140.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 360.00 |
| 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: (check only one) | PAGE 12 OF 18 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

| | | |
|---|----------------------------|---|
| Full Name (Last, First, Middle Initial) A. Justin Darisse | | Date of Receipt |
| Mailing Address 108 Crossbow Ln | | M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2014 |
| City | State | Zip Code |
| Gaithersburg | MD | 20878-2781 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer | Occupation | |
| National Council Of Farmer Cooperative | Director of Communications | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 120.00 | |
| | | Transaction ID : A6B647815C3E844C3906 |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Vicki Hicks | | Date of Receipt |
| Mailing Address 3080 S Building | | M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2014 |
| City | State | Zip Code |
| Washington | DC | 20250-0001 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer | Occupation | |
| Agribank, Fcb | Vice President, Government Relations | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 40.00 | |
| | | Transaction ID : A3DA00F31226E45A4BF5 |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. Mr. Chet Esther | | Date of Receipt |
| Mailing Address 4025 County Road 5 | | M M M / D D D / Y Y Y Y Y Y 06 / 13 / 2014 |
| City | State | Zip Code |
| Leesburg | AL | 35983-5342 |
| FEC ID number of contributing federal political committee. | C | |
| Name of Employer | Occupation | |
| Information Requested | Unknown | |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | 20.00 | |
| | | Transaction ID : AB209457F14A74AA593C |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 180.00 |
| 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: (check only one) | PAGE 13 OF 18 |
| <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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Mr. Chet Esther
Full Name (Last, First, Middle Initial)

Mailing Address 4025 County Road 5

| | | |
|------------------|-------------|------------------------|
| City Leesburg | State AL | Zip Code 35983-5342 |
|------------------|-------------|------------------------|

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

| | |
|---|-----------------------|
| Name of Employer Information Requested | Occupation Unknown |
|---|-----------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 13 | / | 2014 |

Transaction ID : ABDCA234AE4D64258B26

Amount of Each Receipt this Period

| |
|--------|
| 300.00 |
|--------|

B. Dan Coyne
Full Name (Last, First, Middle Initial)

Mailing Address 625 Delphi Rd NW

| | | |
|-----------------|-------------|------------------------|
| City Olympia | State WA | Zip Code 98502-1711 |
|-----------------|-------------|------------------------|

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

| | |
|---|--------------------------------|
| Name of Employer Northwest Dairy Association | Occupation Industry Affairs |
|---|--------------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 13 | / | 2014 |

Transaction ID : ABF59FD4BD13D479EBCC

Amount of Each Receipt this Period

| |
|--------|
| 500.00 |
|--------|

c. Mr. Doug Reimer
Full Name (Last, First, Middle Initial)

Mailing Address 284878 Ironwood Rd

| | | |
|--------------------|-------------|-------------------|
| City Guttenberg | State IA | Zip Code 52052 |
|--------------------|-------------|-------------------|

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

| | |
|--|----------------------------|
| Name of Employer Land O'lakes, Inc. | Occupation Board Member |
|--|----------------------------|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **965.00**

Date of Receipt

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | / | 13 | / | 2014 |

Transaction ID : A97DF1AECECBFA44A6A87

Amount of Each Receipt this Period

| |
|-------|
| 20.00 |
|-------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 820.00 |
| 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 14 OF 18 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Alarik Myrin | | Date of Receipt |
| Mailing Address HC 65 Box 30 | | <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Altamont | UT | 84001-9703 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : A2D89CA9FB4624475B0D |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Cobank | Director | <input type="text" value="250.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="250.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|--|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. Jon Marthedal | | Date of Receipt |
| Mailing Address 1280 E Lincoln Ave | | <input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Fresno | CA | 93725-9425 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : AE27002F5E78446E9B05 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| CoBank/Sunmaid | Director | <input type="text" value="250.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="715.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Robert Bray | | Date of Receipt |
| Mailing Address PO Box 65 | | <input type="text" value="06"/> / <input type="text" value="27"/> / <input type="text" value="2014"/> |
| City | State | Zip Code |
| Redvale | CO | 81431-0065 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : AC127E16E0DC04D42A91 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| Cobank | Director | <input type="text" value="250.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text" value="250.00"/> | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="750.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text" value=""/> |

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

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

FOR LINE NUMBER: PAGE 15 OF 18
(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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Ms. Marlis Carson
Full Name (Last, First, Middle Initial)
Mailing Address 50 F St NW
Ste 900
City Washington State DC Zip Code 20001-1530
FEC ID number of contributing federal political committee. **C**
Name of Employer National Council Of Farmer Cooperative Occupation Senior VP & General Counsel, Legal, Ta
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 540.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
06 / 27 / 2014
Transaction ID : AC9D5EB8E7029447CA5B
Amount of Each Receipt this Period
500.00

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 500.00 |
| TOTAL This Period (last page this line number only).....▶ | 4630.00 |

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

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

FOR LINE NUMBER: PAGE 16 OF 18
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)
A. Dairy Farmers Of America/depac

Mailing Address 10220 N. Ambassador Dr.

City State Zip Code
 Kansas City MO 64153

FEC ID number of contributing federal political committee. **C** C00001388

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : A29D94495365941C3925

Amount of Each Receipt this Period
 5000.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 5000.00 |
| TOTAL This Period (last page this line number only).....▶ | 5000.00 |

**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 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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. Suntrust Bank

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2157

Purpose of Disbursement
Merchant Service Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 02 / 2014

Transaction ID : BE897BD1FAB9C4784BA5

Amount of Each Disbursement this Period

47.00

Full Name (Last, First, Middle Initial)

B. Suntrust Bank

Mailing Address 1445 New York Ave NW

City Washington State DC Zip Code 20005-2157

Purpose of Disbursement
Account Analysis Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 19 / 2014

Transaction ID : B988BFFF09B7545909A7

Amount of Each Disbursement this Period

20.56

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

67.56

67.56

**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)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. DELBENE FOR CONGRESS

Mailing Address PO BOX 487

City **BOTHELL** State **WA** Zip Code **98041**

Purpose of Disbursement
Contribution to Committee

Candidate Name
Rep. Suzan K. DelBene

Office Sought: House Senate President
State: **WA** District: **01**

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 1 | 4 |

Transaction ID : B63C0E682183343D9A6F

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

B. Citizens For Cochran

Mailing Address 228 S. Washington Street
Suite B-20

City **Alexandria** State **VA** Zip Code **22314-5402**

Purpose of Disbursement
Contribution to Committee

Candidate Name
Sen. Thad Cochran

Office Sought: House Senate President
State: **MS** District: **Runoff2014**

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 2 | | 2 | 0 | 1 | 4 |

Transaction ID : B7D6B11D1B5914CE982A

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CHERI BUSTOS

Mailing Address P.O. BOX 77

City **EAST MOLINE** State **IL** Zip Code **61244**

Purpose of Disbursement
Contribution to Committee

Candidate Name
Rep. Cheri L. Bustos

Office Sought: House Senate President
State: **IL** District: **17**

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 4 | | 2 | 0 | 1 | 4 |

Transaction ID : BF204A833A31049BF917

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

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

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |