

# 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.   
MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 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 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)  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 (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  04 / 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 RICHARD KASPER

Signature of Treasurer RICHARD KASPER [Electronically Filed] Date  07 / 09 / 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

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"/>		283629.00
(b) Cash on Hand at Beginning of Reporting Period.....	240584.02	
(c) Total Receipts (from Line 19) .....	3406.55	58876.57
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	243990.57	342505.57
7. Total Disbursements (from Line 31).....	33500.00	132015.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	210490.57	210490.57
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

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).....	2120.00	52794.78
(ii) Unitemized .....	270.00	4043.88
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2390.00	56838.66
(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) .....	2390.00	56838.66
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.....	1000.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	16.55	37.91
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))..... ▶	3406.55	58876.57
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	3406.55	58876.57

**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 .....	0.00	15.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	15.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	33500.00	132000.00
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)) ..	33500.00	132015.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33500.00	132015.00

**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) .....	2390.00	56838.66
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2390.00	56838.66
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	15.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	15.00

**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)  
 11a     11b     11c     12  
 13     14     15     16     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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

**A. JOHN HAUGEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1028 VALLEY ST  
 City WAHPETON State ND Zip Code 58075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MDFC Occupation VP ENGINEERING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2014  
**Transaction ID : SA11AI.20465**  
 Amount of Each Receipt this Period  
 20.00

**B. JOHN HAUGEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1028 VALLEY ST  
 City WAHPETON State ND Zip Code 58075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MDFC Occupation VP ENGINEERING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2014  
**Transaction ID : SA11AI.20466**  
 Amount of Each Receipt this Period  
 20.00

**C. JOHN HAUGEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1028 VALLEY ST  
 City WAHPETON State ND Zip Code 58075  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MDFC Occupation VP ENGINEERING  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 25 / 2014  
**Transaction ID : SA11AI.20494**  
 Amount of Each Receipt this Period  
 20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

**A. RICHARD KASPER**  
Full Name (Last, First, Middle Initial)

Mailing Address C/O MINN-DAK FARMERS COOPERATIVE  
7525 RED RIVER ROAD

City WAHPETON State ND Zip Code 58075-9698

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

Name of Employer MINN-DAK FARMERS COOPERATIVE Occupation VICE PRESIDENT & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
06 / 03 / 2014  
Transaction ID : SA11AI.20467

Amount of Each Receipt this Period  
20.00

**B. RICHARD KASPER**  
Full Name (Last, First, Middle Initial)

Mailing Address C/O MINN-DAK FARMERS COOPERATIVE  
7525 RED RIVER ROAD

City WAHPETON State ND Zip Code 58075-9698

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

Name of Employer MINN-DAK FARMERS COOPERATIVE Occupation VICE PRESIDENT & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
06 / 03 / 2014  
Transaction ID : SA11AI.20468

Amount of Each Receipt this Period  
20.00

**C. RICHARD KASPER**  
Full Name (Last, First, Middle Initial)

Mailing Address C/O MINN-DAK FARMERS COOPERATIVE  
7525 RED RIVER ROAD

City WAHPETON State ND Zip Code 58075-9698

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

Name of Employer MINN-DAK FARMERS COOPERATIVE Occupation VICE PRESIDENT & CFO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 260.00

Date of Receipt  
06 / 25 / 2014  
Transaction ID : SA11AI.20495

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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)	
<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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial) <b>A. BRENDA PROCHNOW</b>		Date of Receipt
Mailing Address 17375 CO RD 16		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
WAHPETON	ND	58075
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.20427</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	FARMER	<input type="text" value="400.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DARIN PROCHNOW</b>		Date of Receipt
Mailing Address 17375 CO RD 16		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
WAHPETON	ND	58075
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.20428</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	FARMER	<input type="text" value="400.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) <b>C. DARIN PROCHNOW</b>		Date of Receipt
Mailing Address 17375 CO RD 16		<input type="text" value="04"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City	State	Zip Code
WAHPETON	ND	58075
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.20429</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
SELF-EMPLOYED	FARMER	<input type="text" value="1200.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="1600.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2000.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="2120.00"/>

**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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

**A. MICHAEL J ROGERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6899 CORRIGAN DRIVE  
 City BRIGHTON State MI Zip Code 48116  
 FEC ID number of contributing federal political committee. **C** H0MI08042  
 Name of Employer Occupation  
 Receipt For: 2014  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 25 / 2014  
**Transaction ID : SA16.20498**  
 Amount of Each Receipt this Period  
 1000.00  
 refund (their ck) not running again

**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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial)

**A. AMERICA'S LEADERSHIP PAC**

Mailing Address 700 13TH STREET, NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement

Candidate Name

**AMERICA'S LEADERSHIP PAC**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	2		2	0	1	4

**Transaction ID : SB23.16350**

Amount of Each Disbursement this Period

3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. RONALD BARBER**

Mailing Address PO BOX 57715

City TUCSON State AZ Zip Code 85732

Purpose of Disbursement

Candidate Name

**RONALD BARBER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AZ District: 08

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	1	4

**Transaction ID : SB23.16366**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. DANIEL J. M.D. BENISHEK**

Mailing Address 802 PENTOGA TRAIL

City CRYSTAL FALLS State MI Zip Code 49920

Purpose of Disbursement

Candidate Name

**DANIEL J. M.D. BENISHEK**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MI District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	4

**Transaction ID : SB23.16335**

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)..... ▶

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

3	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

**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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial)

**A. Rep. JOHN A BOEHNER**

Mailing Address 7908-I2 CINCINNATI DAYTON RD

City WEST CHESTER State OH Zip Code 45069

Purpose of Disbursement

Candidate Name  
**Rep. JOHN A BOEHNER**

Office Sought:  House  Senate  President  
State: OH District: 08  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2014

**Transaction ID : SB23.16345**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. BRUCE L BRALEY**

Mailing Address PO BOX 390

City WATERLOO State IA Zip Code 50704

Purpose of Disbursement

Candidate Name  
**BRUCE L BRALEY**

Office Sought:  House  Senate  President  
State: IA District: 01  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		02		2014

**Transaction ID : SB23.16348**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Sen. THAD COCHRAN**

Mailing Address 386A HIGHWAY 7 SOUTH

City OXFORD State MS Zip Code 38655

Purpose of Disbursement  
for June 24th primary run-off

Candidate Name  
**Sen. THAD COCHRAN**

Office Sought:  House  Senate  President  
State: MS District: 00  
Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼ Runoff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2014

**Transaction ID : SB23.16382**

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4000.00
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**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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial)

**A. K MICHAEL CONAWAY**

Mailing Address 4100 Cardinal Lane

City MIDLAND State TX Zip Code 79707

Purpose of Disbursement

Candidate Name  
**K MICHAEL CONAWAY**

Office Sought:  House  
 Senate  
 President  
State: TX District: 11

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 17 / 2014

Transaction ID : **SB23.16334**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. JOSEPH CROWLEY**

Mailing Address 76-24 KNEELAND AVENUE

City ELMHURST State NY Zip Code 11373

Purpose of Disbursement

Candidate Name  
**JOSEPH CROWLEY**

Office Sought:  House  
 Senate  
 President  
State: NY District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
05 / 02 / 2014

Transaction ID : **SB23.16344**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. RODNEY DAVIS**

Mailing Address 305 BEACH WOOD DRIVE

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement

Candidate Name  
**RODNEY DAVIS**

Office Sought:  House  
 Senate  
 President  
State: IL District: 13

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
04 / 28 / 2014

Transaction ID : **SB23.16336**

Amount of Each Disbursement this Period

1000.00

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

7000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial) <b>A. DIANA L DEGETTE</b>		Date of Disbursement MM / DD / YYYY 05 / 29 / 2014
Mailing Address 290 Elm Street		Transaction ID : <b>SB23.16365</b>
City Denver	State CO	
Zip Code 80220	Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>DIANA L DEGETTE</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CO District: 01	

Full Name (Last, First, Middle Initial) <b>B. JEFF DENHAM</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 941 EAST MONTE VISTA		Transaction ID : <b>SB23.16337</b>
City TURLOCK	State CA	
Zip Code 95381	Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>JEFF DENHAM</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CA District: 19	

Full Name (Last, First, Middle Initial) <b>C. Rep. SAM FARR</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address P.O. Box 7548 SE CORNER SANTA LUCIA/CAMINO REAL		Transaction ID : <b>SB23.16393</b>
City Carmel	State CA	
Zip Code 93920	Purpose of Disbursement	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>Rep. SAM FARR</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Category/ Type
Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: CA District: 17	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial) <b>A. RICHARD LANE JR HUDSON</b>		Date of Disbursement MM / DD / YYYY 04 / 28 / 2014
Mailing Address 86 SPRING ST NW		Transaction ID : <b>SB23.16338</b>
City CONCORD	State NC	
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>RICHARD LANE JR HUDSON</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: NC District: 08	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. ROBIN L. KELLY</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 4203 CEDARWOOD LANE		Transaction ID : <b>SB23.16390</b>
City MATTESON	State IL	
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>ROBIN L. KELLY</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: IL District: 02	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ANGUS STANLEY JR KING</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address 15 POTTER STREET		Transaction ID : <b>SB23.16353</b>
City BRUNSWICK	State ME	
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>ANGUS STANLEY JR KING</b>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
State: ME District: 00	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial)

**A. DOUG LAMALFA**

Mailing Address 16 LAMALFA LN.

City State Zip Code  
BIGGS CA 95917

Purpose of Disbursement

Candidate Name

**DOUG LAMALFA**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	1	4

**Transaction ID : SB23.16339**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**B. Rep. COLLIN CLARK PETERSON**

Mailing Address 26192 FLOYD LAKE POINT ROAD

City State Zip Code  
DETROIT LAKES MN 56501

Purpose of Disbursement

Candidate Name

**Rep. COLLIN CLARK PETERSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MN District: 07

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	5		2	0	1	4

**Transaction ID : SB23.16378**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

**C. Rep. COLLIN CLARK PETERSON**

Mailing Address 26192 FLOYD LAKE POINT ROAD

City State Zip Code  
DETROIT LAKES MN 56501

Purpose of Disbursement

Candidate Name

**Rep. COLLIN CLARK PETERSON**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MN District: 07

Date of Disbursement

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

**Transaction ID : SB23.16395**

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)..... ▶

3	5	0	0	0	0	0	0	0	0

3	5	0	0	0	0	0	0	0	0

**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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial) <b>A. MARK LUNSFORD PRYOR</b>		Date of Disbursement MM / DD / YYYY 06 / 05 / 2014
Mailing Address 37 CALAIS COURT		Transaction ID : <b>SB23.16377</b>
City LITTLE ROCK	State AR	
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>MARK LUNSFORD PRYOR</b>	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	
State: AR	District: 00	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. HAROLD D ROGERS</b>		Date of Disbursement MM / DD / YYYY 06 / 26 / 2014
Mailing Address 309 COLLEGE ST		Transaction ID : <b>SB23.16392</b>
City SOMERSET	State KY	
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>HAROLD D ROGERS</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: KY	District: 05	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. Rep. MIKE MR. THOMPSON</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2014
Mailing Address P O Box 1998		Transaction ID : <b>SB23.16349</b>
City St. Helena	State CA	
Purpose of Disbursement	Category/Type	Amount of Each Disbursement this Period 1000.00
Candidate Name <b>Rep. MIKE MR. THOMPSON</b>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: CA	District: 01	Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(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)  
**MINN-DAK FARMERS COOPERATIVE SUGAR PAC (MDSPAC)**

Full Name (Last, First, Middle Initial)

**A. DANIEL WEBSTER**

Mailing Address 3400 OLD WINTER GARDEN ROAD

City ORLANDO State FL Zip Code 32805

Purpose of Disbursement

Candidate Name

**DANIEL WEBSTER**

Office Sought:  House  
 Senate  
 President

State: FL District: 10

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 26 / 2014

**Transaction ID : SB23.16387**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. THEODORE SCOTT YOHO**

Mailing Address 8209 SOUTHWEST 95TH LANE

City GAINESVILLE State FL Zip Code 32608

Purpose of Disbursement

Candidate Name

**THEODORE SCOTT YOHO**

Office Sought:  House  
 Senate  
 President

State: FL District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
04 / 28 / 2014

**Transaction ID : SB23.16340**

Amount of Each Disbursement this Period

1000.00

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

2000.00

33500.00