

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
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

ADDRESS (number and street) 50 F Street NW
Suite 900
 Check if different than previously reported. (ACC)
Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** C00002238
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 02 01 2010 through 02 28 2010

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 Jill M Thomson

Signature of Treasurer Electronically Filed by Jill M Thomson Date 03 19 2010

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							
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		50192.43
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	74401.57									
(c) Total Receipts (from Line 19)	17850.00	29850.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	92251.57	80042.43								
7. Total Disbursements (from Line 31)	48.39	1065.86								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	92203.18	78976.57								
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**

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)	7300.00	7300.00
(ii) Unitemized	550.00	550.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7850.00	7850.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	10000.00	22000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17850.00	29850.00
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 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))	17850.00	29850.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17850.00	29850.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1000.00
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.....	48.39	65.86
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))..	48.39	1065.86
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48.39	1065.86

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	17850.00	29850.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17850.00	29850.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
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	0.00

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 6 / 11
	<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	

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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A.

Full Name (Last, First, Middle Initial)
Mr. William F Covington

Mailing Address 3008 S. Nc 119

City State Zip Code
Mebane NC 27302

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

Name of Employer Southern States Cooperative, Inc. Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2010

Transaction ID: AC2BAC0B36D264187989

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
Maxey Love

Mailing Address 224 Mallet Hill Rd.

City State Zip Code
Columbia SC 29223-3205

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

Name of Employer Southern States Cooperative, Inc. Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2010

Transaction ID: A5D696937C4C94C63B50

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
Wilbur Ward

Mailing Address 156 Ward Farm Rd
PO BOX 938

City State Zip Code
Clarkton NC 28433-0938

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

Name of Employer Southern States Cooperative, Inc. Occupation Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
02 / 17 / 2010

Transaction ID: AB1856A385DE547038F5

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 / 11
	<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.	Full Name (Last, First, Middle Initial) R Bruce Johnson	Date of Receipt MM / DD / YYYY 02 / 17 / 2010
	Mailing Address 29900 King William Rd	Transaction ID: AA7F48B79F08045AC9DB
	City State Zip Code West Point VA 23181-3210	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Southern States Cooperative, Inc.	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Greg Wickham	Date of Receipt MM / DD / YYYY 02 / 17 / 2010
	Mailing Address 8369 Vassar Dr	Transaction ID: AD4D387CBA5164B7E922
	City State Zip Code Manlius NY 13104-9425	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Dairylea Cooperative, Inc.	Occupation President & CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) Daryl Grannis	Date of Receipt MM / DD / YYYY 02 / 17 / 2010
	Mailing Address 1432 Energy Rd	Transaction ID: A2480A2AA4D664D2EA98
	City State Zip Code Flemingsburg KY 41041-9232	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Southern States Cooperative, Inc.	Occupation Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	1650.00
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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Full Name (Last, First, Middle Initial)
John East

Mailing Address 4025 Co Rd 5

City Leesburg State AL Zip Code 35983-5342

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

Name of Employer Southern States Cooperative, Inc. Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 02 / 17 / 2010
Transaction ID: A35F89603A352411EB24
Amount of Each Receipt this Period 250.00

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

Mailing Address 356 Morning Star Way

City Castle Rock State CO Zip Code 80108-9065

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 ▼ 1000.00

Date of Receipt 02 / 17 / 2010
Transaction ID: A92B03B3D7F1C491C9E0
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Doug Youngdahl

Mailing Address 4339 Hale Ranch Ln

City Fair Oaks State CA Zip Code 95628-6466

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

Name of Employer Blue Diamond Growers Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 02 / 17 / 2010
Transaction ID: A4E2560548C174BA694D
Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 2250.00

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

A.

Full Name (Last, First, Middle Initial)
Mr. John Johnson

Mailing Address 10 Echo Lake Blvd

City State Zip Code
Saint Paul MN 55115-1469

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

Name of Employer Occupation
Chs Inc. President & CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 0

Transaction ID: AC7EAB45AEBF94289825

Amount of Each Receipt this Period
1000.00

B.

Full Name (Last, First, Middle Initial)
Allen O'Hara

Mailing Address 7994 Pleasant Ct

City State Zip Code
Frederick MD 21701-3394

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

Name of Employer Occupation
Maryland & Virginia Milk Producers Unknown

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 0

Transaction ID: A34BA0E9463D441D2AE7

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Robert Andersen

Mailing Address 4941 South 73 St

City State Zip Code
Lincoln NE 68516-4234

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

Name of Employer Occupation
Nebraska Co-op Council Unknown

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 0

Transaction ID: A8235231D0F5F4B4483B

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)

1550.00

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 10 / 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)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A.

Full Name (Last, First, Middle Initial)
Steve Krikava

Mailing Address 5417 Malibu Dr

City State Zip Code
Minneapolis MN 55436-1033

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

Name of Employer Occupation
Land Olakes Unknown

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 0

Transaction ID: A4DB1491DF4884DD9A8D

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
R. J. Gray

Mailing Address 4908 Fawn Run

City State Zip Code
Yukon OK 73099-2356

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

Name of Employer Occupation
Oklahoma Cooperative Council Unknown

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 1 7 / 2 0 1 0

Transaction ID: AC04943DC47684FA6A14

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)

7300.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 11
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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.

Full Name (Last, First, Middle Initial) American Crystal Sugar Pac		Date of Receipt
Mailing Address		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 7 / 2 0 1 0
City	State	Zip Code
FEC ID number of contributing federal political committee.		Transaction ID: A05ACB45F54A149E49BE
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text"/> 5000.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 5000.00	
<input type="checkbox"/> Other (specify) ▼		

B.

Full Name (Last, First, Middle Initial) Land Olakes Pac		Date of Receipt
Mailing Address P.o. Box 64101		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 7 / 2 0 1 0
City	State	Zip Code
St Paul	MN	55164
FEC ID number of contributing federal political committee.		Transaction ID: ABB5797F0BEE54D95B5E
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text"/> 5000.00
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/> 5000.00	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 10000.00
TOTAL This Period (last page this line number only)	<input type="text"/> 10000.00