

# 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.

NATIONAL CORN GROWERS ASSOCIATION (NCGA)

ADDRESS (number and street)

Check if different than previously reported. (ACC)

Washington DC 20001 -

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:

|                                      |                                      |  |  |
|--------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input checked="checked" type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)                   | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10)                  | <input type="checkbox"/> 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   /  /  through  /  /

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 Ms. Brooke Shupe Appleton

Signature of Treasurer Ms. Brooke Shupe Appleton [Electronically Filed] Date  /  /

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 |  |  |  |  |  |  |  |  |  |  |  |  |  |
|-----------------|--|--|--|--|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**NATIONAL CORN GROWERS ASSOCIATION (NCGA)**

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

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2015"/>  | <input type="text" value="85729.72"/>  | <input type="text" value="85729.72"/>  |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="212554.07"/> |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="3420.00"/>   | <input type="text" value="137935.00"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="215974.07"/> | <input type="text" value="223664.72"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="20017.88"/>  | <input type="text" value="58678.53"/>  |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="195956.19"/> | <input type="text" value="164986.19"/> |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

Write or Type Committee Name

NATIONAL CORN GROWERS ASSOCIATION (NCGA)

Report Covering the Period: From: 07 / 01 / 2015 To: 07 / 31 / 2015

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 2690.00                       | 105670.00                         |
| (ii) Unitemized .....   | 230.00                        | 31765.00                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 2920.00                       | 137435.00                         |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 500.00                        | 500.00                            |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 3420.00                       | 137935.00                         |
| 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))..... ▶                        | 3420.00                       | 137935.00                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 3420.00                       | 137935.00                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>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 .....   | 17.88                         | 178.53                            |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 17.88                         | 178.53                            |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 20000.00                      | 58500.00                          |
| 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)) ..      | 20017.88                      | 58678.53                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 20017.88                      | 58678.53                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 3420.00                       | 137935.00                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 3420.00                       | 137935.00                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 17.88                         | 178.53                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 17.88                         | 178.53                            |

**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 OF 15                 |
|   | <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 CORN GROWERS ASSOCIATION (NCGA)**

**A. Susie Spurlock**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 840

|                   |             |                        |
|-------------------|-------------|------------------------|
| City<br>Stratford | State<br>TX | Zip Code<br>79084-0840 |
|-------------------|-------------|------------------------|

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

|                          |                      |
|--------------------------|----------------------|
| Name of Employer<br>Self | Occupation<br>Grower |
|--------------------------|----------------------|

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 |
| 07    | / | 13    | / | 2015        |

**Transaction ID : AC9A3D9D9F81A4CA6AAE**

Amount of Each Receipt this Period  
500.00

**B. Mr. Martin Barbre**  
Full Name (Last, First, Middle Initial)  
Mailing Address 501 W Main St

|               |             |                        |
|---------------|-------------|------------------------|
| City<br>Carmi | State<br>IL | Zip Code<br>62821-1429 |
|---------------|-------------|------------------------|

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

|                          |                      |
|--------------------------|----------------------|
| Name of Employer<br>Self | Occupation<br>Farmer |
|--------------------------|----------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1950.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 14    | / | 2015        |

**Transaction ID : A9D60CAA461754039A72**

Amount of Each Receipt this Period  
600.00

Auction Cigars

**C. Mr. Garry Niemeyer**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5 Sugar Creek Ln

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Glenarm | State<br>IL | Zip Code<br>62536-6524 |
|-----------------|-------------|------------------------|

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

|                          |                      |
|--------------------------|----------------------|
| Name of Employer<br>Self | Occupation<br>Farmer |
|--------------------------|----------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2100.00

Date of Receipt  

|       |   |       |   |             |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 07    | / | 20    | / | 2015        |

**Transaction ID : A69A9F36A18534D02871**

Amount of Each Receipt this Period  
1000.00

Donation Acre Club

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2100.00 |
| <b>TOTAL</b> 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 15 |
|   | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12<br><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 CORN GROWERS ASSOCIATION (NCGA)**

**A. Mr. Lynn Crisp**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17240 W Highway 6  
 City Kenesaw State NE Zip Code 68956-1682  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Farmer  
 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  
 07 / 20 / 2015  
**Transaction ID : A5AFE51E9A64F4D5092E**  
 Amount of Each Receipt this Period  
 20.00

**B. F. Jon Holzfaster**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 77035 Road 343  
 City Paxton State NE Zip Code 69155-4000  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Farmer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 20 / 2015  
**Transaction ID : A94687330917546B28FF**  
 Amount of Each Receipt this Period  
 450.00  
 Auction Flag

**C. Philip Gordon**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4690 Willow Rd  
 City Saline State MI Zip Code 48176-9369  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Occupation Farmer  
 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  
 07 / 22 / 2015  
**Transaction ID : A0A9C5FF5928F4F10B06**  
 Amount of Each Receipt this Period  
 20.00

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 490.00 |
| <b>TOTAL</b> 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 15  
(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 CORN GROWERS ASSOCIATION (NCGA)**

Full Name (Last, First, Middle Initial)  
**A. Wesley Spurlock**

Mailing Address PO Box 840

City Stratford State TX Zip Code 79084-0840

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

Name of Employer Self Occupation Grower

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
4600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2015  
**Transaction ID : AB070E286399C4E18961**

Amount of Each Receipt this Period  
100.00

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

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 100.00  |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 2690.00 |



**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 15  
(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 CORN GROWERS ASSOCIATION (NCGA)**

Full Name (Last, First, Middle Initial)  
**A. ADM PAC**

Mailing Address PO BOX 1470

City Decatur State IL Zip Code 62525-1820

FEC ID number of contributing federal political committee. **C** C00093963

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 07 / 22 / 2015

**Transaction ID : A295A67E2EE2149949C1**

Amount of Each Receipt this Period  
 500.00

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

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

**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)  
**NATIONAL CORN GROWERS ASSOCIATION (NCGA)**

Full Name (Last, First, Middle Initial)

**A. NEUGEBAUER CONGRESSIONAL COMMITTEE**

Mailing Address PO BOX 54175

City LUBBOCK State TX Zip Code 79453

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. Randy Neugebauer**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 19

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2015

**Transaction ID : B198122853E4A4B7291A**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. WYDEN FOR SENATE**

Mailing Address 232 NE 9TH AVENUE

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Sen. Ron Wyden**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : BAD6CF7BCD2D2C4DDEA7**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BENNET FOR COLORADO**

Mailing Address PO BOX 3078

City DENVER State CO Zip Code 80201

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Sen. Michael F. Bennet**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CO District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : B2FFE22AC6126462DA3B**

Amount of Each Disbursement this Period

1500.00

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

3500.00

**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)  
**NATIONAL CORN GROWERS ASSOCIATION (NCGA)**

Full Name (Last, First, Middle Initial)

**A. GARAMENDI FOR CONGRESS**

Mailing Address C/O CALIFORNIA POLITICAL LAW, INC.

City State Zip Code  
LONG BEACH CA 90807

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. John R. Garamendi**

Office Sought:  House  
 Senate  
 President  
State: CA District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : B459B2FFC231A41BE953**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. WALORSKI FOR CONGRESS INC**

Mailing Address PO BOX 954

City State Zip Code  
Mishawaka IN 46546-0954

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. Jackie Swihart Walorski**

Office Sought:  House  
 Senate  
 President  
State: IN District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : B93B545CD71554C84BD6**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BRAD ASHFORD FOR CONGRESS**

Mailing Address PO BOX 24023

City State Zip Code  
OMAHA NE 68124

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. Brad Ashford**

Office Sought:  House  
 Senate  
 President  
State: NE District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2015

**Transaction ID : B0FD8894EDA7D433B91A**

Amount of Each Disbursement this Period

1500.00

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

3500.00

**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)  
**NATIONAL CORN GROWERS ASSOCIATION (NCGA)**

Full Name (Last, First, Middle Initial)

**A. CONAWAY FOR CONGRESS**

Mailing Address PO Box 51272

City Midland State TX Zip Code 79710

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. Mike Conaway**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2015

Transaction ID : **B9DB2E96296BB42C6B07**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DAN LIPINSKI FOR CONGRESS**

Mailing Address P.O. BOX 520

City WESTERN SPRINGS State IL Zip Code 60558

Purpose of Disbursement  
Primary Contribution

Candidate Name

**Rep. Daniel W. Lipinski**

Office Sought:  House  
 Senate  
 President  
State: IL District: 03

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2015

Transaction ID : **B768C2513CD3948BBB4C**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. TEXANS FOR HENRY CUELLAR CONGRESSIONAL CAMPAIGN**

Mailing Address 1519 Washington Street  
2nd Floor Suite 200

City Laredo State TX Zip Code 78042

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. Henry R. Cuellar**

Office Sought:  House  
 Senate  
 President  
State: TX District: 28

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 09 / 2015

Transaction ID : **B9264C416992245AC9EE**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

**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)  
**NATIONAL CORN GROWERS ASSOCIATION (NCGA)**

Full Name (Last, First, Middle Initial)

**A. CONAWAY FOR CONGRESS**

Mailing Address PO Box 51272

City Midland State TX Zip Code 79710

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name  
**Rep. Mike Conaway**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 02 / 2015

Transaction ID : B52A7CB24B8C04EF1B81

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. DOLD FOR CONGRESS**

Mailing Address PO BOX 8145

City NORTHFIELD State IL Zip Code 60093

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name  
**Rep. Robert Dold**

Office Sought:  House  
 Senate  
 President  
State: IL District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2015

Transaction ID : B1DAA1808DF7C4809953

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BUCSHON FOR CONGRESS**

Mailing Address PO BOX 250

City NEWBURGH State IN Zip Code 47629

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name  
**Rep. Larry D. Bucshon**

Office Sought:  House  
 Senate  
 President  
State: IN District: 08

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 30 / 2015

Transaction ID : B2441BC3BB0F24982BF5

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

**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)  
**NATIONAL CORN GROWERS ASSOCIATION (NCGA)**

Full Name (Last, First, Middle Initial)

**A. RODNEY FOR CONGRESS**

Mailing Address PO BOX 344

City TAYLORVILLE State IL Zip Code 62568

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. Rodney L. Davis**

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

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 09 / 2015

**Transaction ID : B1FE36E2F1C4A45A0BFB**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. WHITFIELD FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 391

City HOPKINSVILLE State KY Zip Code 42241

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. Ed Whitfield**

Office Sought:  House  
 Senate  
 President  
State: KY District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 23 / 2015

**Transaction ID : BE04FE1DF950041478FE**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. TIM WALZ FOR US CONGRESS**

Mailing Address PO Box 938

City Mankato State MN Zip Code 56002

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name

**Rep. Tim J. Walz**

Office Sought:  House  
 Senate  
 President  
State: MN District: 01

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 30 / 2015

**Transaction ID : BCA14E4EA611A495D924**

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

# 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)  
**NATIONAL CORN GROWERS ASSOCIATION (NCGA)**

Full Name (Last, First, Middle Initial)

### A. ROUNDS FOR SENATE

Mailing Address PO BOX 250

City PIERRE State SD Zip Code 57501

Purpose of Disbursement  
PRIMARY CONTRIBUTION

Candidate Name  
**Sen. Mike Rounds**

Office Sought:  House  
 Senate  
 President  
State: SD District:

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 30 / 2015

Transaction ID : B8C827F4B0CAB4954964

Amount of Each Disbursement this Period

1000.00

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Amount of Each Disbursement this Period

### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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)..... ▶

1000.00

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

20000.00