REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN - POLITICAL ACTION COMMITTEE, INC.

ADDRESS (number and street) ☐ Check if different than previously reported
111 PONCE DE LEON AVENUE

CITY, STATE and ZIP CODE
CLEWISTON, FLORIDA 33440

RECEIVED FEDERAL ELECTION COMMISSION
JUL 14 12 20 PM '97

2. FEC IDENTIFICATION NUMBER
C 00234120

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

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☒ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ _____ (Type of Election)
election on _____ _____ in the State of _____

☐ Thirtieth day report following the General Election on
_____ _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 6-1-97 through 6-30-97		
6. (a) Cash on Hand January 1, 19 97		$ 13,140.53
(b) Cash on Hand at Beginning of Reporting Period	$ 11,363.08	
(c) Total Receipts (from Line 19)	$ 2,926.00	$ 30,073.05
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 14,289.08	$ 43,213.58
7. Total Disbursements (from Line 30)	$ 2,500.00	$ 31,424.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 11,789.08	$ 11,789.08
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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: Stephen V. Coffman

Signature of Treasurer: S V Coffman

Date: 7/9/97

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

FEC FORM 3X
(revised 9/93)

FE6AN068

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE UNITED STATES SUGAR CORPORATION-EMPLOYEE STOCK OWNERSHIP PLAN-POLITICAL ACTION COMMITTEE, INC.

REPORT COVERING PERIOD FROM 6/1/97 TO: 6/30/97

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	200.45	14,217.25	11(a)(i)
ii. Unitemized	2,699.52	15,700.28	11(a)(ii)
iii. Total (add i and ii) ➤	2,899.97	29,917.53	11(a)(iii)
b. Political Party Committees	-	-	11(b)
c. Other Political Committees (such as PACs)	-	-	11(c)
d. Total Contributions (add a iii, b and c) ➤	2,899.97	29,917.53	11(d)
12. Transfers From Affiliated/Other Party Committees	-	-	12
13. All Loans Received	-	-	13
14. Loan Repayments Received	-	-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-	-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-	-	16
17. Other Federal Receipts (Dividends, Interest, etc.)	26.03	155.52	17
18. Transfers from Nonfederal Account for Joint Activity	-	-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	2,926.00	30,073.05	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	2,926.00	30,073.05	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	-	-	21(a)(i)
ii. Non-Federal Share	-	-	21(a)(ii)
b. Other Federal Operating Expenditures	-	174.50	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	-	174.50	21(c)
22. Transfers to Affiliated/Other Party Committees	-	-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	2,500.00	31,250.00	23
24. Independent Expenditures (use Schedule E)	-	-	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-	-	25
26. Loan Repayments Made	-	-	26
27. Loans Made	-	-	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	-	-	28(a)
b. Political Party Committees	-	-	28(b)
c. Other Political Committees (such as PACs)	-	-	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	-	-	28(d)
29. Other Disbursements	-	-	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	2,500.00	31,424.50	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	2,500.00	31,424.50	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,899.97	29,917.53	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,899.97	29,917.53	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	-	174.50	35
36. Offsets to Operating Expenditures (from line 15)	-	-	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	-	174.50	37

LINE NUMBER: 11(a)(i)

SCHEDULE A ITEMIZED RECEIPTS

* 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: UNITED STATES SUGAR CORPORATION
EMPLOYEE STOCK OWNERSHIP PLAN
POLITICAL ACTION COMMITTEE, INC. C00234120

FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE	AMOUNT OF EACH RECEIPT THIS PERIOD
CARL N BARNES P. O. BOX 352 CLEWISTON ,FL 33440 OCCUPATION: ASST.SUPT.CULTVA AGGREGATE YEAR-TO-DATE: $590.00	U.S. SUGAR CORP.	MONTHLY PAYROLL DEDUCTION	$15.00 ($15.00 PER PAY PERIOD)
TRISTAN G CHAPMAN 90 LIVE OAK LANE LABELLE ,FL 33935 OCCUPATION: V.P., SGCPC AGGREGATE YEAR-TO-DATE: $975.00	U.S. SUGAR CORP.	06/30/1997	$25.00
TOM D LITTLES P. O. BOX 1617 608 SAGINAW AVENUE CLEWISTON ,FL 33440 OCCUPATION: SAFETY DIRECTOR AGGREGATE YEAR-TO-DATE: $375.00	U.S. SUGAR CORP.	MONTHLY PAYROLL DEDUCTION	$75.00 ($75.00 PER PAY PERIOD)
MAGIN PEREZ P. O. BOX 871 313 DESOTO AVENUE CLEWISTON ,FL 33440 OCCUPATION: MGR.ENG.DES/SADM AGGREGATE YEAR-TO-DATE: $640.70	U.S. SUGAR CORP.	MONTHLY PAYROLL DEDUCTION	$23.45 ($23.45 PER PAY PERIOD)
WALTER G SMITH P. O. BOX 1010 LA BELLE ,FL 33935 OCCUPATION: DIRECTOR AGGREGATE YEAR-TO-DATE: $632.00	U.S. SUGAR CORP.	MONTHLY PAYROLL DEDUCTION	$22.00 ($22.00 PER PAY PERIOD)
ELIAS A YACAMAN P. O. BOX 2818 CLEWISTON ,FL 33440 OCCUPATION: PROCESS MANAGER AGGREGATE YEAR-TO-DATE: $200.00	U.S. SUGAR CORP.	MONTHLY PAYROLL DEDUCTION	$40.00 ($40.00 PER PAY PERIOD)

LINE NUMBER: 11(a)(i)

SCHEDULE A ITEMIZED RECEIPTS

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NAME OF COMMITTEE: UNITED STATES SUGAR CORPORATION
EMPLOYEE STOCK OWNERSHIP PLAN
POLITICAL ACTION COMMITTEE,INC. C00234120

FULL NAME, MAILING ADDRESS AND ZIP	NAME OF EMPLOYER	DATE	AMOUNT OF EACH RECEIPT THIS PERIOD
TOTAL OF INDIVIDUAL CONTRIBUTIONS FOR THIS REPORTING PERIOD WHICH ARE GREATER THAN OR EQUAL TO $200.00 .			$200.45
TOTAL OF INDIVIDUAL CONTRIBUTIONS FOR THIS REPORTING PERIOD WHICH ARE LESS THAN $200.00 .			$2,699.52
GRAND TOTAL FOR REPORTING PERIOD 06/01/1997 THRU 06/30/1997			$2,899.97

GRAND TOTAL FOR THE YEAR (ALL EMPLOYEES): $29,917.53

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN POLITICAL ACTION COMMITTEE, INC.

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. FIRST BANK OF CLEWISTON P. O. BOX 1237 CLEWISTON, FLORIDA 33440 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	(INTEREST RECEIVED FROM HI-FI ACCOUNT) Aggregate Year-to-Date $ 155.52		$26.03
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer / Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

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

TOTAL This Period (last page this line number only) $26.03

FE8ANY18

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF BARBARA BOXER 4550 VIA MARINA #302 MARIANA DEL RAY, CA 90292	CONTRIBUTION: BARBARA BOXER (CA/D) SENATE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/11/97	$1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) $1,000.00

FE8AN069

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
LANDRIEU FOR SENATE COMMITTEE/DEBT RETIREMENT 841 CARONDELET STREET. NEW ORLEANS, LA 70113	CONTRIBUTION: MARY LANDRIEU (LA/D) SENATE Disbursement for: ☐ Primary ☐ General ☐ Other (specify) DEBT RETIREMENT	6/30/97	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) $500.00

FE6AN05B

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
THE FREEDOM PROJECT 111 C STREET, S. E. LOWER UNIT WASHINGTON, D. C. 20003	CONTRIBUTION: JOHN BOEHNER (8/OHIO/R) U.S. HOUSE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/30/97	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) $500.00

FE6AN009

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full) UNITED STATES SUGAR CORPORATION - EMPLOYEE STOCK OWNERSHIP PLAN POLITICAL ACTION COMMITTEE, INC.

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
JOHN THUNE FOR CONGRESS P. O. BOX 516 SIOUX FALLS, SD 57701	CONTRIBUTION: JOHN R. THUNE (SD/R) U.S. HOUSE Disbursement for: [ ] Primary [X] General [ ] Other (specify)	6/11/97	$500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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

TOTAL This Period (last page this line number only) $500.00

FE6RN069

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 7-8-97
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

PREPARER: JKS

DATE PREPARED: 7-14-97

FEC FORM 70-2 (12/92)