

# 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)  
Polaris Political Participation Program  
 ADDRESS (number and street)  Check if different than previously reported  
1225 Highway 169 North  
 CITY, STATE and ZIP CODE  
Minneapolis, MN 55441

Jan 23 8 20 AM '93

2. FEC IDENTIFICATION NUMBER  
00279497  
 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

5. Covering Period	COLUMN A	COLUMN B
<u>7/1/93</u> through <u>12/31/93</u>	This Period	Calendar Year-to-Date
6. (a) Cash on Hand January 1, 19 <u>93</u>		\$ (1)
(b) Cash on Hand at Beginning of Reporting Period	\$ 4,358.00	
(c) Total Receipts (from Line 19)	\$ 4,276.25	\$ 8,762.25
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 4,276.25	\$ 8,762.25
7. Total Disbursements (from Line 30)	\$ 0.00	\$ 128.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 4,276.25	\$ 8,634.25
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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  
Mary Zins  
 Signature of Treasurer \_\_\_\_\_ 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.

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
Polaris Political Participation Program	FROM 7/1/93	TO: 12/31/93
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
1. Contributions (other than loans) From:		
b. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A) .....	3,020.94	6,109.50
A. Unitemized .....	1,255.37	2,652.75
ii Total .....	4,276.25	8,762.25
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		
d. Total Contributions .....	4,276.25	8,762.25
11. Transfers From Affiliated/Other Party Committees .....	4,276.25	8,762.25
12. All Loans Received .....		
13. Loan Repayments Received .....		
14. Offsets To Operating Expenditures (Refunds, Rebates, etc.) .....		
15. Refunds of Contributions Made to Federal Candidates and Other Political Committees .....		
16. Other Federal Receipts (Dividends, Interest, etc.) .....		
17. Transfers from Nonfederal Account for Joint Activity .....		
18. Total Receipts .....	4,276.25	8,762.25
19. Total Federal Receipts .....	4,276.25	8,762.25
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share .....		
ii. Non-Federal Share .....		
b. Other Federal Operating Expenditures .....	0.00	128.00
c. Total Operating Expenditures .....	0.00	128.00
22. Transfers to Affiliated/Other Party Committees .....		
23. Contributions to Federal Candidates/Committees and Other Political Committees .....		
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(f)) (use Schedule F) .....		
26. Loan Repayments Made .....		
27. Loans Made .....		
28. Refunds of Contributions To:		
a. Individual/Persons Other Than Political Committees .....		
b. Political Party Committees .....		
c. Other Political Committees (such as PACs) .....		
d. Total Contribution Refunds .....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Total Disbursements .....	0.00	128.00
31. Total Federal Disbursements .....	0.00	128.00
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d) .....	4,276.25	8,762.25
33. Total Contribution Refunds (from line 28d) .....	0.00	0.00
34. Net Contributions (other than loans) (subtract line 33 from line 32) .....	4,276.25	8,762.25
35. Total Federal Operating Expenditures .....	0.00	128.00
36. Offsets to Operating Expenditures (from line 15) .....	0.00	0.00
37. Net Operating Expenditures .....	0.00	128.00

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)  
Polaris Political Participation Program

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chuck Baxter 609 5th Ave. NE Roseau, MN 56751 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Industries Occupation: VP Engineering		Aggregate Year-to-Date > \$ 500.00
James Bernat Rt. 2 Roseau, MN 56751 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Industries Occupation: Test Manager		Aggregate Year-to-Date > \$ 250.00
James Bruba Rt. 4, Box 55A Roseau, MN 56751 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Industries Occupation: VP Manufacturing		Aggregate Year-to-Date > \$ 625.00
Ed Cheuron 4861 Bertlett Blvd. Mound, MN 55364 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Industries Occupation: International Sales Mgr.		Aggregate Year-to-Date > \$ 384.50
Ken Larson 5420 Southwood Dr. Bloomington, MN 55437 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Industries Occupation: President		Aggregate Year-to-Date > \$ 1,000.00
Mike Malone 8653 Terrace View Lane Maple Grove, MN 55311 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Industries Occupation: CFI		Aggregate Year-to-Date > \$ 250.00
Gary Olson 706 N. Main Roseau, MN 56751 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Industries Occupation: MIS Manager		Aggregate Year-to-Date > \$ 375.00

SUB TOTAL of Receipts This Page (optional) .....

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

7  
0  
3  
4  
3  
0  
7  
5  
+  
7  
0  
4

**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 (in Full)**  
 Polaris Political Participation Program

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Albert Penas Badger, MN 56714	Polaris Industries		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Test Manager		
	Aggregate Year-to-Date > \$ 250.00		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ed Skouroun 6075 N. Zinnia Lane Plymouth, MN 55446	Polaris Industries		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP Sales		
	Aggregate Year-to-Date > \$ 300.00		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Strenge P.O. Box 571 Osceola, MN 56020	Polaris Industries		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Plant Manager		
	Aggregate Year-to-Date > \$ 375.00		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Thompson Rt. 1 Middle River, MN 56737	Polaris Industries		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Engineer		
	Aggregate Year-to-Date > \$ 300.00		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Hall Wendel 1516 Hunter Dr. Wayzata, MN 55391	Polaris Industries		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: CEO		
	Aggregate Year-to-Date > \$ 1500.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:		
	Aggregate Year-to-Date > \$		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation:		
	Aggregate Year-to-Date > \$		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	
<b>TOTAL</b> This Period (last page this line number only) ..... 7/1/93-12/31/93	3,020.94

1  
2  
3  
4

**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

*1-25-94*

Registered/Certified Mail

POSTMARKED

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

*MLH*  
 PREPARER

*1-29-94*  
 DATE PREPARED

7403075104