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)
MILK MARKETING INC. POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
8257 Dow Circle

CITY, STATE and ZIP CODE
Strongsville, Ohio 44136

2. FEC IDENTIFICATION NUMBER
C00167692

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 _____ through _____		
6. (a) Cash on Hand January 1, 19____		$ 38,834.60
(b) Cash on Hand at Beginning of Reporting Period	$ 38,834.60	
(c) Total Receipts (from Line 19)	$ 8,384.01	$ 8,384.01
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 47,218.61	$ 47,218.61
7. Total Disbursements (from Line 30)	$ 5,815.00	$ 5,815.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 41,403.61	$ 41,403.61
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

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
William R. Perry Assistant Treasurer

Signature of Treasurer
William R. Perry

Date
4/13/94

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)

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

(revised 1/1/91)

NAME OF COMMITTEE

REPORT COVERING PERIOD
FROM: TO:

	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)			11(a)(i)
ii. Unitemized	8,384.01	8,384.01	11(a)(ii)
iii. Total (add i and ii) ➤	8,384.01	8,384.01	11(a)(iii)
b. Political Party Committees	-0-	-0-	11(b)
c. Other Political Committees (such as PACs)	-0-	-0-	11(c)
d. Total Contributions (add a iii, b and c) ➤	8,384.01	8,384.01	11(d)
12. Transfers From Affiliated/Other Party Committees	-0-	-0-	12
13. All Loans Received	-0-	-0-	13
14. Loan Repayments Received	-0-	-0-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-	-0-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	8,384.01	8,384.01	16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity	-0-	-0-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	8,384.01	8,384.01	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	8,384.01	8,384.01	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	-0-	-0-	21(a)(i)
ii. Non-Federal Share	-0-	-0-	21(a)(ii)
b. Other Federal Operating Expenditures	315.00	315.00	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	315.00	315.00	21(c)
22. Transfers to Affiliated/Other Party Committees	-0-	-0-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	6,000.00	6,000.00	23
24. Independent Expenditures (use Schedule E)	-0-	-0-	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-0-	-0-	25
26. Loan Repayments Made	-0-	-0-	26
27. Loans Made	-0-	-0-	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	(500.00)	(500.00)	28(a)
b. Political Party Committees	-0-	-0-	28(b)
c. Other Political Committees (such as PACs)	-0-	-0-	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	(500.00)	(500.00)	28(d)
29. Other Disbursements	-0-	-0-	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	5,815.00	5,815.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	5,815.00	5,815.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	8,384.01	8,384.01	32
33. Total Contribution Refunds (from line 28d)	(500.00)	(500.00)	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	7,884.01	7,884.01	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	315.00	315.00	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	315.00	315.00	37

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER

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)
MILK MARKETING INC. POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Friends & Neighbors of Steve Gunderson c/o Elizabeth Montgomery & Associates 2418 Davis Avenue Alexandria, VA 22302	House Disbursement for: [x] Primary [ ] General [ ] Other (specify)	1-3-94	$ 500.00
B. Friends of Phil Sharp Committee P.O. Box 117 Mount Vernon, VA 22121	House Disbursement for: [x] Primary [ ] General [ ] Other (specify)	1-3-94	$ 500.00
C. Dave Camp for Congress P.O. Box 423 Midland, MI 48640	House Disbursement for: [x] Primary [ ] General [ ] Other (specify)	1-3-94	$ 500.00
D. Paul Gillmor Committee P.O. Box 910 Port Clinton, OH 43452	House Disbursement for: [x] Primary [ ] General [ ] Other (specify)	3-2-94	$ 500.00
E. Oxley for Congress 1800 R Street, N.W., Suite 605 Washington, D.C. 20009	House Disbursement for: [x] Primary [ ] General [ ] Other (specify)	3-2-94	$ 500.00
F. Citizens for David Mann 501 Capitol Court, N.E., Suite 200 Washington, D.C. 20002	House Disbursement for: [x] Primary [ ] General [ ] Other (specify)	3-2-94	$ 500.00
G. Citizens for Bunning 1717 Dixie Highway, Suite 180 Fort Wright, KY 41011	House Disbursement for: [x] Primary [ ] General [ ] Other (specify)	3-2-94	$ 500.00
H. Congressman Kildee Committee P.O. Box 990 Washington, D.C. 20044-0990	House Disbursement for: [x] Primary [ ] General [ ] Other (specify)	3-2-94	$ 500.00
I. Jeffords for Vermont 517 2nd Street, NE Washington, D.C. 20002	Senate Disbursement for: [x] Primary [ ] General [ ] Other (specify)	3-2-94	$1,000.00

SUBTOTAL of Disbursements This Page (optional) $5,000.00

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

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

MILK MARKETING INC. POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code Friends of Mike DeWine 560 East Seventh Street Perrysburg, OH 43551	Purpose of Disbursement Senate Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 3-2-94	Amount of Each Disbursement This Period $ 1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Phil Sharp Committee P.O. Box 117 Mount Vernon, VA 22121	Purpose of Disbursement Disbursement for: [X] Primary [ ] General [ ] Other (specify)	Date (month, day, year) 1-3-94	Amount of Each Disbursement This Period ($ 500)
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)	$ 500.00
TOTAL This Period (last page this line number only)	$ 5,500.00

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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 4-15-94
☐	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: [illegible]

DATE PREPARED: 4-18-94

FEC FORM 70-2 (12/92)

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