# REPORT OF RECEIPTS AND DISBURSEMENTS

**For Other Than An Authorized Committee**
**(Summary Page)**

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

Oct 19 | 24 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Michael R. McLeod
American Association of Crop Insurers PAC

ADDRESS (number and street) ☐ Check if different than previously reported
One Massachusetts Ave., N.W., Suite 800

CITY, STATE and ZIP CODE
Washington, DC 20001

2. FEC IDENTIFICATION NUMBER
C 00172833

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 July 1, 1996 through Sept. 30, 1996

| | | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|---|---|---|
| 6. | (a) Cash on Hand January 1, 19 96 | | $ 59,056.31 |
| | (b) Cash on Hand at Beginning of Reporting Period | $ 36,981.19 | |
| | (c) Total Receipts (from Line 19) | $ 7,063.49 | $ 26,348.37 |
| | (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | $ 44,044.68 | $ 85,404.68 |
| 7. | Total Disbursements (from Line 30) | $ 17,716.50 | $ 59,076.50 |
| 8. | Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | $ 26,328.18 | $ 26,328.18 |
| 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
Michael R. McLeod

Signature of Treasurer
Michael R. McLeod

Date
10/15/96

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)

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

(revised 1/1/91)

NAME OF COMMITTEE: American Association of Crop Insurers PAC

REPORT COVERING PERIOD: FROM 7/1/96 TO: 9/30/96

| | 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) | 1,155.00 | 2,655.00 | 11(a)(i) |
| ii. Unitemized | 4,625.00 | 21,540.00 | 11(a)(ii) |
| iii. Total (add i and ii) ➤ | 5,780.00 | 24,195.00 | 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) ➤ | 5,780.00 | 24,195.00 | 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 | 1,000.00 | 1,000.00 | 16 |
| 17. Other Federal Receipts (Dividends, interest, etc.) | 283.49 | 1,153.37 | 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) ➤ | 7,063.49 | 26,348.37 | 19 |
| 20. Total Federal Receipts (subtract line 16 from line 19) ➤ | 7,063.49 | 26,348.37 | 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 | -0- | -0- | 21(b) |
| c. Total Operating Expenditures (add a i, a ii, and b) ➤ | -0- | -0- | 21(c) |
| 22. Transfers to Affiliated/Other Party Committees | -0- | -0- | 22 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | 17,700.00 | 58,200.00 | 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 | -0- | -0- | 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) ➤ | -0- | -0- | 28(d) |
| 29. Other Disbursements (bank deposit slips) | 16.50 | 876.50 | 29 |
| 30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤ | 17,716.50 | 59,076.50 | 30 |
| 31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤ | 17,716.50 | 59,076.50 | 31 |
| **III. Net Contributions/Operating Expenditures** | | | |
| 32. Total Contributions (other than loans)(from line 11d) | 5,780.00 | 24,195.00 | 32 |
| 33. Total Contribution Refunds (from line 28d) | -0- | -0- | 33 |
| 34. Net Contributions (other than loans)(subtract line 33 from 32) | 5,780.00 | 24,195.00 | 34 |
| 35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤ | -0- | -0- | 35 |
| 36. Offsets to Operating Expenditures (from line 15) | -0- | -0- | 36 |
| 37. Net Operating Expenditures (subtract line 36 from 35) ➤ | -0- | -0- | |

**SCHEDULE A** **ITEMIZED RECEIPTS**
(bank interest)

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

PAGE 1 OF 1

FOR LINE NUMBER 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)
American Association of Crop Insurers Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Burke & Herbert Bank & Trust Co.<br>P.O. Box 268<br>Alexandria, VA 22313 | Interest on checking account | 7/96<br>8/96<br>9/96 | $27.32<br>25.28<br>19.54 |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Aggregate Year-to-Date > $ 324.40 | | |
| **B. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| Burke & Herbert Bank & Trust Co.<br>P.O. Box 268<br>Alexandria, VA 22313 | Interest on certificate of deposit | 7/96<br>8/96<br>9/96 | $70.28<br>77.70545<br>70.62 |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Aggregate Year-to-Date > $ 828.97 | | |
| **C. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Aggregate Year-to-Date > $ | | |
| **D. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Aggregate Year-to-Date > $ | | |
| **E. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Aggregate Year-to-Date > $ | | |
| **F. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Aggregate Year-to-Date > $ | | |
| **G. Full Name, Mailing Address and ZIP Code** | **Name of Employer / Occupation** | **Date (month, day, year)** | **Amount of Each Receipt this Period** |
| | | | |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Aggregate Year-to-Date > $ | | |

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

**TOTAL** This Period (last page this line number only) ..... $283.49

FE6A(96)

**SCHEDULE A** **ITEMIZED RECEIPTS**

(individual contributions)

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

PAGE 1 OF 1

FOR LINE NUMBER 11a

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)
American Association of Crop Insurers Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
|---|---|---|---|
| Robert A. Taylor<br>12289 Buck Road<br>La Monte, MO 65337<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Robert A. Taylor Insurance<br>Occupation: Agent/Owner<br>Aggregate Year-to-Date > $ 205.00 | 8/28/96 | $105.00 |
| B. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Nickey Smith<br>312 N. Houston<br>Lamesa, TX 79331<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Southern Crop Insurance<br>Occupation: Agent<br>Aggregate Year-to-Date > $ 205.00 | 7/29/96 | $100.00 |
| C. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Ben Pate<br>Drawer E<br>557 Morton<br>Elkhart, KS 67950<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Ben Pate Agency, L.L.C.<br>Occupation: Agent/Owner<br>Aggregate Year-to-Date > $ 295.00 | 9/27/96 | $100.00 |
| D. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Max J. Claybaker<br>16018 W. Doolin Avenue<br>Blackwell, OK 74631<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Claybaker Crop Insurance<br>Occupation: President<br>Aggregate Year-to-Date > $ 700.00 | 8/7/96 | $500.00 |
| E. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Sid Banack<br>P.O. Box 1266<br>Vero Beach, FL 32961-1266<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Sid Banack Insurance<br>Occupation: President<br>Aggregate Year-to-Date > $ 205.00 | 8/19/96 | $100.00 |
| F. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Mark Haechten<br>P.O. Box 112<br>Anson, TX 79501<br>Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Haechten Crop Insurance<br>Occupation: Owner/Agent<br>Aggregate Year-to-Date > $ 250.00 | 9/27/96 | $250.00 |
| G. Full Name, Mailing Address and ZIP Code | Name of Employer / Occupation | Date (month, day, year) | Amount of Each Receipt this Period |
| Receipt For: ☐ Primary ☐ General ☐ Other (specify): | Aggregate Year-to-Date > $ | | |

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

**TOTAL** This Period (last page this line number only) ..... $1,155.00

**SCHEDULE B** **ITEMIZED DISBURSEMENTS**
(campaign contributions)

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



FOR LINE NUMBER 23

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**NAME OF COMMITTEE (in Full)**

American Association of Crop Insurers Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| The Senate Victory Fund<br>P.O. Box 1331<br>Jackson, MS 39215-1331 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 7/22/96 | $1,000.00 |
| **B. Full Name, Mailing Address and ZIP Code** | **Purpose of Disbursement** | **Date (month, day, year)** | **Amount of Each Disbursement This Period** |
| Fazio for Congress<br>P.O. Box 990<br>Washington, DC 20044-0990 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 7/30/96 | 500.00 |
| **C. Full Name, Mailing Address and ZIP Code** | **Purpose of Disbursement** | **Date (month, day, year)** | **Amount of Each Disbursement This Period** |
| Friends of John Boehner<br>P.O. Box 15189<br>Washington, DC 20003-0189 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 7/30/96 | 500.00 |
| **D. Full Name, Mailing Address and ZIP Code** | **Purpose of Disbursement** | **Date (month, day, year)** | **Amount of Each Disbursement This Period** |
| Joe Skeen for Congress<br>P.O. Box 2446<br>Roswell, NM 88202 | campaign contribution<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) | 7/31/96 | 2,000.00 |
| **E. Full Name, Mailing Address and ZIP Code** | **Purpose of Disbursement** | **Date (month, day, year)** | **Amount of Each Disbursement This Period** |
| Team Emerson '96<br>P.O. Box 822<br>Cape Girardeau, MO 63702 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 8/8/96 | 1,000.00 |
| **F. Full Name, Mailing Address and ZIP Code** | **Purpose of Disbursement** | **Date (month, day, year)** | **Amount of Each Disbursement This Period** |
| Bob Smith for Congress<br>5000 Cirrus Dr., Suite 150<br>Medford, OR 97504 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 8/22/96 | 2,000.00 |
| **G. Full Name, Mailing Address and ZIP Code** | **Purpose of Disbursement** | **Date (month, day, year)** | **Amount of Each Disbursement This Period** |
| Walsh for Congress Comm.<br>P.O. Box 1974<br>Syracuse, NY 13201 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 9/6/96 | 5,000.00 |
| **H. Full Name, Mailing Address and ZIP Code** | **Purpose of Disbursement** | **Date (month, day, year)** | **Amount of Each Disbursement This Period** |
| Chenoweth for Congress<br>4451 Brookfield Corporate Dr., #200<br>Chantilly, VA 20151-1652 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 9/6/96 | 500.00 |
| **I. Full Name, Mailing Address and ZIP Code** | **Purpose of Disbursement** | **Date (month, day, year)** | **Amount of Each Disbursement This Period** |
| Latham for Congress Committee<br>4010 Franconia Road<br>Alexandria, VA 22310 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 9/9/96 | 500.00 |

**SUBTOTAL** of Disbursements This Page (optional) ..... 8,500.00

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

FE6AND09

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**
(campaign contributions)

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



FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
American Association of Crop Insurers Political Action Committee

| A. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|---|---|---|
| Joe Skeen for Congress<br>P.O. Box 2446<br>Roswell, NM 88202 | campaign contribution<br>Disbursement for: [ ] Primary [X] General [ ] Other (specify) | 9/19/96 | 2,500.00 |
| B. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Bob Smith for Congress<br>5000 Cirrus Dr., Suite 150<br>Medford, OR 97504 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 9/23/96 | 2,000.00 |
| C. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Tim Johnson for South Dakota<br>328 D Street, S.E.<br>Washington, DC 20003 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 9/23/96 | 500.00 |
| D. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Volkmer for Congress<br>Box 991<br>Hannibal, MO 63401 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 9/23/96 | 1,000.00 |
| E. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Earl Pomeroy for Congress<br>P.O. Box 75214<br>Washington, DC 20013-5214 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 9/25/96 | 500.00 |
| F. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| Stenholm for Congress Comm.<br>4710 N. 40th Street<br>Arlington, VA 22207 | campaign contribution<br>Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | 9/30/96 | 2,700.00 |
| G. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | | |
| H. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | | |
| I. Full Name, Mailing Address and ZIP Code | Purpose of Disbursement | Date (month, day, year) | Amount of Each Disbursement This Period |
| | Disbursement for: [ ] Primary [ ] General [ ] Other (specify) | | |

| | |
|---|---|
| SUBTOTAL of Disbursements This Page (optional) | 9,200.00 |
| TOTAL This Period (last page this line number only) | 17,700.00 |

**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 10-15-96 |
| ☐ | 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 |

TG

10-19-96

~~10-19-96~~

PREPARER

DATE PREPARED

FEC FORM 70-2 (12/92)