

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

Farmers' Rice Cooperative Fund

ADDRESS (number and street) P.O. Box 15223

Check if different than previously reported. (ACC) Sacramento CA 95851

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00146605

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 Quarterly 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 checked="" type="checkbox"/> May 20 (M5) | <input 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:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day Post -Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 04 01 2010 through 04 30 2010

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 James Dodson

Signature of Treasurer Electronically Filed by James Dodson Date 05 14 2010

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							
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FEC FORM 3X (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
Farmers' Rice Cooperative Fund

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		21594.05
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	49833.88									
(c) Total Receipts (from Line 19)	4150.17	64125.17								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	53984.05	85719.22								
7. Total Disbursements (from Line 31)	9000.00	40735.17								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	44984.05	44984.05								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Farmers' Rice Cooperative Fund

Report Covering the Period: From: To:

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2200.00	47074.20
(ii) Unitemized	715.00	15815.80
(iii) TOTAL (add Lines 11(a)(i) and (ii)	2915.00	62890.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	2915.00	62890.00
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	1235.17	1235.17
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 Transfer (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))	4150.17	64125.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	4150.17	64125.17

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	40735.17
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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) Shared 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))..	9000.00	40735.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9000.00	40735.17

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	2915.00	62890.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2915.00	62890.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 / 10
	<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)
Farmers' Rice Cooperative Fund

A.	Full Name (Last, First, Middle Initial) DENNIS GALLAGHER	Date of Receipt MM / DD / YYYY 04 / 14 / 2010
	Mailing Address 1998 PLEASANT GROVE RD	Transaction ID: SA11AI.8809
	City State Zip Code RIO OSO CA 95674	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	ANNUAL CONTRIBUTION
	Name of Employer SELF EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 500.00	

B.	Full Name (Last, First, Middle Initial) ROBERT GALLAGHER	Date of Receipt MM / DD / YYYY 04 / 19 / 2010
	Mailing Address 3999 BEAR RIVER DRIVE	Transaction ID: SA11AI.8815
	City State Zip Code RIO OSO CA 95674	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	ANNUAL CONTRIBUTION
	Name of Employer SELF EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 250.00	

C.	Full Name (Last, First, Middle Initial) LaVerne Grell	Date of Receipt MM / DD / YYYY 04 / 14 / 2010
	Mailing Address 647 Bind Street	Transaction ID: SA11AI.8813
	City State Zip Code Yuba City CA 95991	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	ANNUAL CONTRIBUTION
	Name of Employer SELF EMPLOYED Occupation FARM OWNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 300.00	

SUBTOTAL of Receipts This Page (optional)	1050.00
TOTAL 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 7 / 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Farmers' Rice Cooperative Fund

A. Full Name (Last, First, Middle Initial)
Charles Hoppin
Mailing Address 2781 O Banion Road
City Yuba City State CA Zip Code 95991
FEC ID number of contributing federal political committee. **C**
Name of Employer Self Employed Occupation Farmer
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00
Date of Receipt 04 / 29 / 2010
Transaction ID: SA11AI.8804
Amount of Each Receipt this Period 375.00
ANNUAL CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KATHY HOPPIN
Mailing Address 2781O'BANION ROAD
City YUBA CITY State CA Zip Code 95993
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation FARMER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 375.00
Date of Receipt 04 / 29 / 2010
Transaction ID: SA11AI.8805
Amount of Each Receipt this Period 375.00
ANNUAL CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN LEONARD
Mailing Address 430 BUTTE VIEW DRIVE
City GRIDLEY State CA Zip Code 95948
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation FARMER
Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00
Date of Receipt 04 / 14 / 2010
Transaction ID: SA11AI.8812
Amount of Each Receipt this Period 400.00
ANNUAL CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1150.00
TOTAL This Period (last page this line number only) ► 2200.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 / 10
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Farmers' Rice Cooperative Fund

A.	Full Name (Last, First, Middle Initial) CARDOZA FOR CONGRESS		Date of Receipt
	Mailing Address 2724 Winton Way		<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Atwater	CA	95301
	FEC ID number of contributing federal political committee.		<input type="text" value="C00369850"/>
	Name of Employer		Occupation
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ INKIND-REFUND		Transaction ID: SA16.8807 Amount of Each Receipt this Period <input type="text" value="1235.17"/> REFUND FROM CARDOZA FOR CONGRESS	
Aggregate Year-to-Date ▼		<input type="text" value="1235.17"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1235.17"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1235.17"/>

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)
Farmers' Rice Cooperative Fund

A. Full Name (Last, First, Middle Initial)
FRIENDS OF BLANCHE LINCOLN

Mailing Address PO BOX 3197
P O BOX 118

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
FUNDRAISER

Candidate Name
FRIENDS OF BLANCHE LINCOLN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AR District: 01

Transaction ID: SB23.8822

Date of Disbursement

04 / 08 / 2010

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF BLANCHE LINCOLN

Mailing Address PO BOX 3197
P O BOX 118

City LITTLE ROCK State AR Zip Code 72203

Purpose of Disbursement
IN KIND CONTRIBUTION - HOSTED LUNCHEON

Candidate Name
FRIENDS OF BLANCHE LINCOLN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: AR District: 01

IN KIND

Transaction ID: SB23.8825

Date of Disbursement

04 / 08 / 2010

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
FRIENDS OF ROSA DELAURO

Mailing Address 49 HUNTINGTON STREET

City NEW HAVEN State CT Zip Code 06511

Purpose of Disbursement
FUNDRAISER

Candidate Name
FRIENDS OF ROSA DELAURO

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CT District: 03

Transaction ID: SB23.8824

Date of Disbursement

04 / 21 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional) ►

5500.00

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)

PAGE 10 / 10

<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)
Farmers' Rice Cooperative Fund

A. Full Name (Last, First, Middle Initial) LUCAS FOR CONGRESS	Transaction ID: SB23.8823 Date of Disbursement MM / DD / YYYY 04 / 14 / 2010
	Mailing Address Post Office Box 1726 Post Office Box 1726
City Oklahoma City State OK Zip Code 73101	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement FUNDRAISER Candidate Name LUCAS FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
B. Full Name (Last, First, Middle Initial) MIKE THOMPSON FOR CONGRESS	Transaction ID: SB23.8821 Date of Disbursement MM / DD / YYYY 04 / 11 / 2010
	Mailing Address 5429 Madison Avenue
City Sacramento State CA Zip Code 95841	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement FUNDRAISER Candidate Name MIKE THOMPSON FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional)

3500.00

TOTAL This Period (last page this line number only)

9000.00