

**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

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

ADDRESS (number and street)

2101 WILSON BOULEVARD SUITE 400

☐Check if different  
than previously  
reported. (ACC)

ARLINGTON

VA

22201

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00325324

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:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☒

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

05

01

2007

through

05

31

2007

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

Roger Eldridge

Signature of Treasurer

Electronically Filed by Roger Eldridge

Date

05

07

2007

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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Report Covering the Period:

From:

M	M		D	D		Y	Y	Y	Y
0	5		0	1		2	0	0	7

To:

M	M		D	D		Y	Y	Y	Y
0	5		3	1		2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2007</span>		2865.97
(b) Cash on Hand at Beginning of Reporting Period .....	18083.96	
(c) Total Receipts (from Line 19) .....	9295.00	29024.99
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	27378.96	31890.96
7. Total Disbursements (from Line 31) .....	6000.00	10512.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21378.96	21378.96
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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. 02/2003)

Page 3

Write or Type Committee Name

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	5	0	1	2	0	0	7

To:

M	M	D	D	Y	Y	Y	Y
0	5	3	1	2	0	0	7

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	4155.00	10631.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	140.00	2393.99
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	4295.00	13024.99
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	5000.00	16000.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ..... ➤	9295.00	29024.99
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 .....	0.00	0.00
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)) .....	9295.00	29024.99
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9295.00	29024.99

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		0.00	12.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		0.00	12.00
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		6000.00	10500.00
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))..		6000.00	10512.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		6000.00	10512.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	9295.00	29024.99
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9295.00	29024.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	12.00
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	12.00

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 6 / 17

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

**A.**

Full Name (Last, First, Middle Initial)

Tom Balmer

Mailing Address 1303 Hancock Ave

City

Alexandra

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Milk Producers  
Federation

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

747.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	7

Transaction ID: SA11A1.6720

Amount of Each Receipt this Period

83.00

**B.**

Full Name (Last, First, Middle Initial)

Tom Balmer

Mailing Address 1303 Hancock Ave

City

Alexandra

State

VA

Zip Code

22301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Milk Producers  
Federation

Occupation

Senior Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

830.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	0	7

Transaction ID: SA11A1.6721

Amount of Each Receipt this Period

83.00

**C.**

Full Name (Last, First, Middle Initial)

Charles Beckendorf

Mailing Address 19503 Cyress Rosehill Road

City

Tomball

State

TX

Zip Code

77377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Dairy Farmer/NMPF Board Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	0	7

Transaction ID: SA11A1.6723

Amount of Each Receipt this Period

250.00

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

416.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Rob Byrne		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1001 N. Vermont Street Apt 808		<b>Transaction ID:</b> SA11A1.6698
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer National Milk Producers Federation	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 378.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Rob Byrne		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7
Mailing Address 1001 N. Vermont Street Apt 808		<b>Transaction ID:</b> SA11A1.6699
City Arlington	State VA	Zip Code 22201
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.00
Name of Employer National Milk Producers Federation	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Jaime Castaneda		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7
Mailing Address 1744 Pine Valley Drive		<b>Transaction ID:</b> SA11A1.6704
City Vienna	State VA	Zip Code 22182
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer National Milk Producers Federation	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

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

109.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

**A.** Jaime Castaneda

Mailing Address 1744 Pine Valley Drive

City State Zip Code  
 Vienna VA 22182

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
National Milk Producers  
Federation

Occupation  
Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.6705

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B.** Roger Cryan

Mailing Address 9367 Tovito Drive

City State Zip Code  
 Fairfax VA 22031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
National Milk Producers  
Federation

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.6706

Amount of Each Receipt this Period

30.00

Full Name (Last, First, Middle Initial)

**C.** Roger Cryan

Mailing Address 9367 Tovito Drive

City State Zip Code  
 Fairfax VA 22031

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
National Milk Producers  
Federation

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.6707

Amount of Each Receipt this Period

30.00

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

85.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 17

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) John Dilland Mailing Address 30030 Westgate Road City Farmington Hills State MI Zip Code 48834 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Michigan Milk Producers Association Occupation Coop Exec Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6729 Amount of Each Receipt this Period 500.00
<b>B.</b> Full Name (Last, First, Middle Initial) Roger Eldridge Mailing Address 2112 Kings Garden Way City Falls Church State VA Zip Code 22043 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer National Milk Producers Federation Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 405.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 5 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6696 Amount of Each Receipt this Period 45.00
<b>C.</b> Full Name (Last, First, Middle Initial) Roger Eldridge Mailing Address 2112 Kings Garden Way City Falls Church State VA Zip Code 22043 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer National Milk Producers Federation Occupation Vice President Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 450.00		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 3 1 / 2 0 0 7 <b>Transaction ID:</b> SA11A1.6697 Amount of Each Receipt this Period 45.00

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

590.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Rich Ghilarducci		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 144 Grayland Heights		<b>Transaction ID:</b> SA11A1.6730
City Rio Dell	State CA	Zip Code 95562
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Humboldt Creamery	Occupation Coop Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Gordon Hoover		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 2 1 / 2 0 0 7
Mailing Address 165 Cambridge Road		<b>Transaction ID:</b> SA11A1.6728
City Gap	State PA	Zip Code 17527
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Dairy Farmer	Occupation NMPF Board Member	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b> Full Name (Last, First, Middle Initial) JAIME JONKER		Date of Receipt M M / D D / Y Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1712 CORCORAN ST., NW APT. 1		<b>Transaction ID:</b> SA11A1.6722
City WASHINGTON	State DC	Zip Code 20009
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 125.00
Name of Employer National Milk Producers Fed.	Occupation Director, Regulatory Affairs	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 324.99	

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

1125.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

**A.** Full Name (Last, First, Middle Initial)  
Cornell Kasbergen  
Mailing Address 21744 Road 152

City State Zip Code  
Tulare CA 93274

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dairy Farmer

Occupation  
NMPF Board Member

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 4 / 2 0 0 7

Transaction ID: SA11A1.6726

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Jerry Kozak  
Mailing Address 9844 Palace Green Way

City State Zip Code  
Vienna VA 22181

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Milk Producers  
Federation

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.6692

Amount of Each Receipt this Period

100.00

**C.** Full Name (Last, First, Middle Initial)  
Jerry Kozak  
Mailing Address 9844 Palace Green Way

City State Zip Code  
Vienna VA 22181

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Milk Producers  
Federation

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.6693

Amount of Each Receipt this Period

100.00

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

**A.** Full Name (Last, First, Middle Initial)  
Christopher Policinski  
Mailing Address 19700 Sweetwater Curve

City State Zip Code  
Shorewood MN 55331

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Land O'Lakes

Occupation  
Coop Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 7

Transaction ID: SA11A1.6727

Amount of Each Receipt this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Richard Smith  
Mailing Address 10220 N. Ambassador Dr.

City State Zip Code  
Kansas City MO 64153

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Dairy Farmers of America

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11A1.6724

Amount of Each Receipt this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Jim E. Tillison  
Mailing Address 13951 Real Quite Court

City State Zip Code  
Gainsville VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Milk Producers  
Fed.

Occupation  
Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.6718

Amount of Each Receipt this Period

25.00

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

1025.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 17

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Full Name (Last, First, Middle Initial)

Jim E. Tillison

Mailing Address 13951 Real Quite Court

City State Zip Code  
 Gainesville VA 20155

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Milk Producers  
Fed.

Occupation

Sr. Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.6719

Amount of Each Receipt this Period

25.00

B. Full Name (Last, First, Middle Initial)

Peter Vitaliano

Mailing Address 6306 N. 28th Street

City State Zip Code  
 Arlington VA 22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Milk Producers  
Federation

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.6702

Amount of Each Receipt this Period

40.00

C. Full Name (Last, First, Middle Initial)

Peter Vitaliano

Mailing Address 6306 N. 28th Street

City State Zip Code  
 Arlington VA 22207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Milk Producers  
Federation

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 3 1 / 2 0 0 7

Transaction ID: SA11A1.6703

Amount of Each Receipt this Period

40.00

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

105.00

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

4155.00

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

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

FOR LINE NUMBER: PAGE 14 / 17

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Full Name (Last, First, Middle Initial)  
 LAND O'LAKES INC/AGRILIANCE LLC PAC (LOL PAC) FKA LAND O'LAKE INC PAC

Mailing Address BOX 64101

City State Zip Code  
 ST PAUL MN 55164

FEC ID number of contributing  
federal political committee.

**C** C00009423

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 5 / 0 3 / 2 0 0 7

Transaction ID: SA11C.6732

Amount of Each Receipt this Period

5000.00

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

5000.00

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

5000.00

# **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 15 / 17

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

## **A. BOB ETHERIDGE FOR CONGRESS COMMITTEE**

Mailing Address POST OFFICE BOX 28001  
PO BOX 28001

City RALEIGH State NC Zip Code 27611

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NC District: 02

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.6736

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. BOSWELL FOR CONGRESS**

Mailing Address PO Box 6220

City Des Moines State IA Zip Code 50309

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IA District: 03

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.6741

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. BOYD FOR CONGRESS**

Mailing Address P.O. Box 15703  
P.O. Box 15703

City Tallahassee State FL Zip Code 32317

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 02

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.6738

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

2000.00

**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 16 / 17

<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)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

**A. CHAMBLISS FOR SENATE**

Mailing Address POST OFFICE BOX 12469

City  
ATLANTA

State  
GA

Zip Code  
30355

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 08

**Transaction ID: SB23.6733**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. COLEMAN FOR SENATE 08**

Mailing Address 570 ASBURY STREET SUITE 201A

City  
ST PAUL MN

State  
MN

Zip Code  
55104

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 00

**Transaction ID: SB23.6742**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. GREEN MOUNTAIN PAC**

Mailing Address PO Box 1142

City  
Montpelier

State  
VT

Zip Code  
05601

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID: SB23.6744**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

**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 17 / 17

<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)

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

**A.** PETERSON FOR CONGRESS

Mailing Address 26192 Floyd Lake Point Road

City State Zip Code  
Detroit Lakes MN 56501

Purpose of Disbursement

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MN District: 07

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Category/  
Type

Transaction ID: SB23.6739

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

6000.00