

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Report Covering the Period: From: / / To: / /

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|---------------------------------------|---------------------------------------|
| 6. (a) Cash on Hand January 1, <input type="text" value="2013"/> | <input type="text" value="12332.58"/> | <input type="text" value="12332.58"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="24918.69"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="8898.84"/> | <input type="text" value="46193.03"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="33817.53"/> | <input type="text" value="58525.61"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="22038.07"/> | <input type="text" value="46746.15"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="11779.46"/> | <input type="text" value="11779.46"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="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

NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

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)..... | 1709.00 | 22619.00 |
| (ii) Unitemized | 189.84 | 2474.03 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶ | 1898.84 | 25093.03 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 7000.00 | 18000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 8898.84 | 43093.03 |
| 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 | 3100.00 |
| 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 Transfers (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))..... ▶ | 8898.84 | 46193.03 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶ | 8898.84 | 46193.03 |

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) Allocated 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 | 38.07 | 246.15 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 38.07 | 246.15 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 22000.00 | 46500.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (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) Allocated 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)) .. | 22038.07 | 46746.15 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 22038.07 | 46746.15 |

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) | 8898.84 | 43093.03 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 8898.84 | 43093.03 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 38.07 | 246.15 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 38.07 | 246.15 |

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

This report is Amended to correctly report \$1,298.84 in payroll deductions for the month of June that were previously reported on the September Monthly Report with the incorrect receipt date. Additionally, \$2,587.68 in payroll deductions originally reported on this report were removed, and correctly reported on the April and May Monthly reports.

Form/Schedule:
Transaction ID:

**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 7 OF 23 |
| | <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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) A. Peter Vitaliano | | Date of Receipt |
| Mailing Address 6303 North 28th St | | <input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2013"/> |
| City | State | Zip Code |
| Arlington | VA | 22207-1111 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : AC7D8B0D75B6F422A894 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| National Milk Producers Federation | Vice President | <input type="text" value="60.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="655.00"/> | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) B. John Hollay | | Date of Receipt |
| Mailing Address 2101 Wilson Blvd. Suite 400 | | <input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2013"/> |
| City | State | Zip Code |
| Arlington | VA | 22201-3062 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : AB383584FB40E4CF09F6 |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| National Milk Producers Federation | Vice President, Government Relations | <input type="text" value="20.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="220.00"/> | |

| | | |
|---|--------------------------------------|---|
| Full Name (Last, First, Middle Initial) C. Jerry J. Kozak | | Date of Receipt |
| Mailing Address 9844 Palace Green Wy | | <input type="text" value="06"/> / <input type="text" value="14"/> / <input type="text" value="2013"/> |
| City | State | Zip Code |
| Vienna | VA | 22181-6097 |
| FEC ID number of contributing federal political committee. | <input type="text" value="C"/> | Transaction ID : A7DB4B687FA1A41B898A |
| Name of Employer | Occupation | Amount of Each Receipt this Period |
| National Milk Producers Federation | President & CEO | <input type="text" value="125.00"/> |
| Receipt For: | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | <input type="text" value="1375.00"/> | |

| | |
|--|-------------------------------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | <input type="text" value="205.00"/> |
| TOTAL This Period (last page this line number only).....▶ | <input type="text"/> |

**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 8 OF 23 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Jamie S. Jonker
Full Name (Last, First, Middle Initial)

Mailing Address 1712 Corcoran Street Nw Apt. 1

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20009-2415 |
|--------------------|-------------|------------------------|

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 ▼ **550.00**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 14 | | 2013 |

Transaction ID : A4F99AD4E6F6D4932BE6

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

B. Tom M Balmer
Full Name (Last, First, Middle Initial)

Mailing Address 310 Cloverway Drive

| | | |
|--------------------|-------------|------------------------|
| City Alexandria | State VA | Zip Code 22314-4841 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer National Milk Producers Federation | Occupation Executive Vice President |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **913.00**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 14 | | 2013 |

Transaction ID : A328610BC06434FA8BC0

Amount of Each Receipt this Period

| |
|-------|
| 83.00 |
|-------|

C. Dana L Brooks
Full Name (Last, First, Middle Initial)

Mailing Address 2010 Wilson Blvd
Ste 400

| | | |
|-------------------|-------------|------------------------|
| City Arlington | State VA | Zip Code 22201-3076 |
|-------------------|-------------|------------------------|

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 ▼ **550.00**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | | 14 | | 2013 |

Transaction ID : A6CEA2BCEBE684D52B22

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 183.00 |
| 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: (check only one) | PAGE 9 OF 23 |
| | <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 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Chris W. Galen
 Full Name (Last, First, Middle Initial)
 Mailing Address 3903 Shelley Lane
 City Annandale State VA Zip Code 22003-2234
 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 ▼ 330.00

Date of Receipt 06 / 14 / 2013
Transaction ID : AB105DDA4057B47C3ABF
 Amount of Each Receipt this Period 300.00

B. James E. Tillison
 Full Name (Last, First, Middle Initial)
 Mailing Address 13951 Real Quite Crt
 City Gainesville State VA Zip Code 20155-3148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation Sr. Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 812.50

Date of Receipt 06 / 14 / 2013
Transaction ID : ADD2485B394324DD68EB
 Amount of Each Receipt this Period 75.00

C. Jim Mulhern
 Full Name (Last, First, Middle Initial)
 Mailing Address 8000 Inverness Ridge Rd.
 City Potomac State MD Zip Code 20854-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 830.00

Date of Receipt 06 / 14 / 2013
Transaction ID : A7E986DD0A4504413874
 Amount of Each Receipt this Period 83.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 188.00
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: (check only one) | PAGE 10 OF 23 |
| | <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 | |

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

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

Mailing Address 1805 Abbey Oak Drive

City Vienna State VA Zip Code 22182-1904

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 ▼ 220.00

Date of Receipt 06 / 14 / 2013
Transaction ID : A6337F6DC0C804CE4A17

Amount of Each Receipt this Period 200.00

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

Mailing Address PO Box 5

City Avon Park State FL Zip Code 33826-0005

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 06 / 19 / 2013
Transaction ID : A77E88FF053E3462A9A3

Amount of Each Receipt this Period 500.00

C. Dana L Brooks
Full Name (Last, First, Middle Initial)

Mailing Address 2010 Wilson Blvd Ste 400

City Arlington State VA Zip Code 22201-3076

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 ▼ 600.00

Date of Receipt 06 / 28 / 2013
Transaction ID : AAE4215EDFB304645992

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 570.00

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: (check only one) | PAGE 11 OF 23 |
| | <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 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Jamie S. Jonker
Full Name (Last, First, Middle Initial)

Mailing Address 1712 Corcoran Street Nw Apt. 1

| | | |
|--------------------|-------------|------------------------|
| City Washington | State DC | Zip Code 20009-2415 |
|--------------------|-------------|------------------------|

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 ▼ **600.00**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | / | 28 | / | 2013 |

Transaction ID : A95FEE2CD8F4A4D6DA36

Amount of Each Receipt this Period

| |
|-------|
| 50.00 |
|-------|

B. Tom M Balmer
Full Name (Last, First, Middle Initial)

Mailing Address 310 Cloverway Drive

| | | |
|--------------------|-------------|------------------------|
| City Alexandria | State VA | Zip Code 22314-4841 |
|--------------------|-------------|------------------------|

FEC ID number of contributing federal political committee. **C**

| | |
|--|--|
| Name of Employer National Milk Producers Federation | Occupation Executive Vice President |
|--|--|

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **996.00**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | / | 28 | / | 2013 |

Transaction ID : A8C18EC0EA966401591A

Amount of Each Receipt this Period

| |
|-------|
| 83.00 |
|-------|

C. Shawna D. Morris
Full Name (Last, First, Middle Initial)

Mailing Address 3 Hickory Hill Court

| | | |
|-----------------------|-------------|------------------------|
| City Silver Spring | State MD | Zip Code 20906-5807 |
|-----------------------|-------------|------------------------|

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 ▼ **204.00**

Date of Receipt

| | | | | |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 06 | / | 28 | / | 2013 |

Transaction ID : A02BC5E937C774E19A82

Amount of Each Receipt this Period

| |
|-------|
| 17.00 |
|-------|

| | |
|---|---------------|
| SUBTOTAL of Receipts This Page (optional)..... | 150.00 |
| 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: (check only one) | PAGE 12 OF 23 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

A. Jaime Castaneda
 Full Name (Last, First, Middle Initial)
 Mailing Address 1805 Abbey Oak Drive
 City Vienna State VA Zip Code 22182-1904
 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 ▼ 240.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : A25DB2277B7E947C9915
 Amount of Each Receipt this Period
 20.00

B. Jim Mulhern
 Full Name (Last, First, Middle Initial)
 Mailing Address 8000 Inverness Ridge Rd.
 City Potomac State MD Zip Code 20854-4011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 913.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : A647A6FFBE93042E1A89
 Amount of Each Receipt this Period
 83.00

C. James E. Tillison
 Full Name (Last, First, Middle Initial)
 Mailing Address 13951 Real Quite Crt
 City Gainesville State VA Zip Code 20155-3148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer National Milk Producers Federation Occupation Sr. Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 887.50

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 28 / 2013
Transaction ID : AD6240F17F475497E8A1
 Amount of Each Receipt this Period
 75.00

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 178.00 |
| 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: (check only one) | PAGE 13 OF 23 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <input type="checkbox"/> 14 |

| | | |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) A. Chris W. Galen | | Date of Receipt |
| Mailing Address 3903 Shelley Lane | | M M M / D D D / Y Y Y Y Y Y 06 / 28 / 2013 |
| City Annandale | State VA | Zip Code 22003-2234 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : A27A1F5D3A7254DFFB1F |
| Name of Employer National Milk Producers Federation | | Amount of Each Receipt this Period |
| Occupation Senior Vice President | | 30.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | 360.00 | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) B. Jerry J. Kozak | | Date of Receipt |
| Mailing Address 9844 Palace Green Wy | | M M M / D D D / Y Y Y Y Y Y 06 / 28 / 2013 |
| City Vienna | State VA | Zip Code 22181-6097 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : A50767D779D1C417F95F |
| Name of Employer National Milk Producers Federation | | Amount of Each Receipt this Period |
| Occupation President & CEO | | 125.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | 1500.00 | |

| | | |
|---|--------------------------|---|
| Full Name (Last, First, Middle Initial) C. Peter Vitaliano | | Date of Receipt |
| Mailing Address 6303 North 28th St | | M M M / D D D / Y Y Y Y Y Y 06 / 28 / 2013 |
| City Arlington | State VA | Zip Code 22207-1111 |
| FEC ID number of contributing federal political committee. C | | Transaction ID : AA3DCAF986D084D31B6B |
| Name of Employer National Milk Producers Federation | | Amount of Each Receipt this Period |
| Occupation Vice President | | 60.00 |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ | |
| | 715.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 215.00 |
| 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 14 OF 23
(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)

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

Mailing Address 2101 Wilson Blvd.
Suite 400

City Arlington State VA Zip Code 22201-3062

FEC ID number of contributing federal political committee. **C**

Name of Employer National Milk Producers Federation Occupation Vice President, Government Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt 06 / 28 / 2013
Transaction ID : AABA1F1999ED64E54A80

Amount of Each Receipt this Period 20.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 20.00

TOTAL This Period (last page this line number only)..... ▶ 1709.00

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

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

FOR LINE NUMBER: PAGE 15 OF 23
(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. Dairy Farmers Of America Inc Depac (dair

Mailing Address P O BOX 909700

City State Zip Code
 KANSAS CITY MO 64190

FEC ID number of contributing federal political committee. **C C00001388**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2013
Transaction ID : A607770C9C6514E188C5

Amount of Each Receipt this Period
 5000.00

Full Name (Last, First, Middle Initial)
B. Maryland & Virginia Milk Producers Coope

Mailing Address 1985 ISAAC NEWTON SQUARE WEST

City State Zip Code
 RESTON VA 20190

FEC ID number of contributing federal political committee. **C C00363069**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2013
Transaction ID : A65B01A949E974F5D978

Amount of Each Receipt this Period
 2000.00

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

Mailing Address

City State Zip Code

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 7000.00 |
| TOTAL This Period (last page this line number only).....▶ | 7000.00 |

**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)

| | | | | | |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input checked="" type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input 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. SunTrust Bank

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 10 / 2013

Transaction ID : B2F96D812DAE24470813

Amount of Each Disbursement this Period

25.00

B. SunTrust Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 21 / 2013

Transaction ID : B3EDD1EAE6A4245E69FA

Amount of Each Disbursement this Period

12.65

C. SunTrust Bank

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 622227

City Orlando State FL Zip Code 32862-2227

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 24 / 2013

Transaction ID : BE43C486292CA48E3827

Amount of Each Disbursement this Period

0.42

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

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

38.07

38.07

**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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. KUSTER FOR CONGRESS, INC.

Mailing Address P.O. BOX 1498

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement

Candidate Name

Ann McLane Kuster

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District: 02

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 1 | 3 |

Transaction ID : B357E7CBCAB7A4536B5B

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. HASTINGS FOR CONGRESS

Mailing Address P.O. BOX 100277

City State Zip Code
FT. LAUDERDALE FL 33310

Purpose of Disbursement
6/17 event

Candidate Name

Rep. Alcee L. Hastings

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 20

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 7 | | 2 | 0 | 1 | 3 |

Transaction ID : B0AD1DFA91AFD4F72AFE

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. MARCIA FUDGE FOR CONGRESS

Mailing Address 3729 SILSBY RD

City State Zip Code
UNIVERSITY HEIGHTS OH 44118

Purpose of Disbursement
6/27 event

Candidate Name

Marcia L Fudge

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OH District: 11

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 7 | | 2 | 0 | 1 | 3 |

Transaction ID : BA9325D4EB4E3494A932

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

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

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 4 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

**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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2013 |

Mailing Address PO BOX 1631

Transaction ID : BE150453F86A24256B7D

City Baltimore State MD Zip Code 21203-1631

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement
6/13 event

| |
|--|
| |
|--|

Candidate Name

Rep. Elijah E. Cummings

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MD District: 07

Full Name (Last, First, Middle Initial)

B. KAREN BASS FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 18 | | 2013 |

Mailing Address 777 S. FIGUEROA STREET
SUITE 4050

Transaction ID : B2B84E98C3728403387C

City LOS ANGELES State CA Zip Code 90017

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement
6/18 event

| |
|--|
| |
|--|

Candidate Name

Karen Bass

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 37

Full Name (Last, First, Middle Initial)

C. FATTAH FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-------------|
| M M M | / | D D D | / | Y Y Y Y Y Y |
| 06 | | 13 | | 2013 |

Mailing Address 3900 FORD ROAD
SUITE 120

Transaction ID : B4E0714D79C9B4898A22

City PHILADELPHIA State PA Zip Code 19131

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement
6/13 event

| |
|--|
| |
|--|

Candidate Name

Rep. Chaka Fattah

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: PA District: 02

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

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

| |
|---------|
| 3000.00 |
|---------|

| |
|--|
| |
|--|

**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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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. Friends Of Jim Clyburn

Mailing Address PO BOX 12567

City Columbia State SC Zip Code 29211-2567

Purpose of Disbursement
6/5 event

Candidate Name
Rep. James E. Clyburn

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: SC District: 06

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 0 | 5 | | 2 | 0 | 1 | 3 |

Transaction ID : BB8677EBE76284518BFA

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 1 | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

B. BILL OWENS FOR CONGRESS

Mailing Address PO Box 1575

City Plattsburgh State NY Zip Code 12901

Purpose of Disbursement
6/28 event

Candidate Name
Rep. Bill L. Owens

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: NY District: 21

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 1 | 3 |

Transaction ID : BC4D38F443E56494B866

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

C. LYNN JENKINS FOR CONGRESS

Mailing Address PO BOX 1441

City TOPEKA State KS Zip Code 66601

Purpose of Disbursement
6/26 event

Candidate Name
Lynn Jenkins

Office Sought: House Senate President
Disbursement For: 2014 Primary General Other (specify) ▼
State: KS District: 02

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 6 | | 2 | 0 | 1 | 3 |

Transaction ID : B2C4AD0183DF0402B921

Amount of Each Disbursement this Period

| | | | | | | |
|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

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

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

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 7 | 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

| | | | | | | |
|---|---|---|---|---|---|---|
| 2 | 7 | 5 | 0 | . | 0 | 0 |
|---|---|---|---|---|---|---|

**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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. SEAN PATRICK MALONEY FOR CONGRESS

Mailing Address 18 W MAIN ST

City BEACON State NY Zip Code 12508

Purpose of Disbursement
6/28 event

Candidate Name
Sean Patrick Maloney

Office Sought: House
 Senate
 President
State: NY District: 18

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 28 / 2013

Transaction ID : **B2AA68A732FE74BD587E**

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. TERRI SEWELL FOR CONGRESS

Mailing Address P.O. BOX 1964

City BIRMINGHAM State AL Zip Code 35201

Purpose of Disbursement
6/19 event

Candidate Name
Terri A Sewell

Office Sought: House
 Senate
 President
State: AL District: 07

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 19 / 2013

Transaction ID : **BD7C93101C8AD4B54BF7**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SIMPSON FOR CONGRESS

Mailing Address 1487 PARKWAY DRIVE

City BLACKFOOT State ID Zip Code 83221

Purpose of Disbursement
6/6 event

Candidate Name
Rep. Michael Keith Simpson

Office Sought: House
 Senate
 President
State: ID District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 06 / 2013

Transaction ID : **B4473BD6DDBF04B73AEE**

Amount of Each Disbursement this Period

1000.00

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

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

2250.00

**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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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. Friends Of Bennie Thompson

Mailing Address P.O. Box 100

City Bolton State MS Zip Code 39041-0100

Purpose of Disbursement
6/13 event

Candidate Name

Rep. Bennie G. Thompson

Office Sought: House
 Senate
 President
State: MS District: 02

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 3 | | 2 | 0 | 1 | 3 |

Transaction ID : B8B14261BA60344099FF

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

B. RAUL LABRADOR FOR IDAHO

Mailing Address PO Box 1616

City Boise State ID Zip Code 83701

Purpose of Disbursement
6/11 event

Candidate Name

Raul Rafael Labrador

Office Sought: House
 Senate
 President
State: ID District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 1 | 1 | | 2 | 0 | 1 | 3 |

Transaction ID : B659A1233F1D9431B986

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAN MAFFEI

Mailing Address PO BOX 230

City SYRACUSE State NY Zip Code 13201

Purpose of Disbursement
6/28/2013 event

Candidate Name

Daniel Benjamin Maffei

Office Sought: House
 Senate
 President
State: NY District: 24

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | | 2 | 8 | | 2 | 0 | 1 | 3 |

Transaction ID : B9FC821E3F349490E96D

Amount of Each Disbursement this Period

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 7 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

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

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 7 | 5 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
| | | | | | | | | | |

**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)
NATIONAL MILK PRODUCERS FEDERATION PAC (NMPF PAC)

Full Name (Last, First, Middle Initial)

A. MOORE FOR CONGRESS

Mailing Address PO BOX 16646

City Milwaukee State WI Zip Code 53216-0646

Purpose of Disbursement
6/5 event

Candidate Name
Rep. Gwen S Moore

Office Sought: House Senate President
State: WI District: 04

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2013

Transaction ID : **BA025CAC9B8B84EC89D1**

Amount of Each Disbursement this Period

1000.00

B. LUCAS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address Post Office Box 1726
Post Office Box 1726

City Oklahoma City State OK Zip Code 73101

Purpose of Disbursement
6/12 event

Candidate Name
Rep. FRANK D. LUCAS

Office Sought: House Senate President
State: OK District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 11 / 2013

Transaction ID : **B725874E7B47848D2925**

Amount of Each Disbursement this Period

1000.00

C. TIM BISHOP FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 437

City FARMINGVILLE State NY Zip Code 11738

Purpose of Disbursement
6/28 event

Candidate Name
Rep. Timothy Bishop

Office Sought: House Senate President
State: NY District: 01

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 28 / 2013

Transaction ID : **BEA522613A55C4A97931**

Amount of Each Disbursement this Period

250.00

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

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

2250.00

**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)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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. LUCAS FOR CONGRESS

Mailing Address Post Office Box 1726
Post Office Box 1726

City Oklahoma City State OK Zip Code 73101

Purpose of Disbursement
6/12 event

Candidate Name
Rep. FRANK D. LUCAS

Office Sought: House
 Senate
 President
State: OK District: 03

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 11 / 2013

Transaction ID : BEC52ED0246244F919EC

Amount of Each Disbursement this Period

4000.00

Category/
Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Category/
Type

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

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

4000.00

22000.00