REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
Florida Farm Bureau Federation FEDPAC

ADDRESS (number and street) ☐ Check if different than previously reported
5700 SW 34th St.

CITY, STATE and ZIP CODE
Gainesville, Fl 32614

Oct 13 12 16 PM '94

2. FEC IDENTIFICATION NUMBER
59-3200249

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☒ October 15 Quarterly Report
☐ January 31 Year End Report
☐ July 31 Mid Year Report (Non-election Year Only)
☐ Termination Report

Monthly Report Due On:
☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

___ Twelfth day report preceding ___ (Type of Election) election on _____ in the State of _____

___ Thirtieth day report following the General Election on ___ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5.	Covering Period 7/1/94 through 9/30/94		
6.	(a) Cash on Hand January 1, 19 94		$ 2,080.00
	(b) Cash on Hand at Beginning of Reporting Period	$ 1,894.84	
	(c) Total Receipts (from Line 18)	$ 2,548.61	$ 2,563.45
	(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 4,443.45	$ 4,643.45
7.	Total Disbursements (from Line 30)	$ 1,500.00	$ 1,700.00
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 2,943.45	$ 2,943.45
9.	Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10.	Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer
Robert W. Richardson

Signature of Treasurer
Robert W. Richardson

Date
10-7-94

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

FE4AN101

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

(revised 1/1/91)

NAME OF COMMITTEE: Florida Farm Bureau Federation FEDPAC

REPORT COVERING PERIOD FROM July 1994 TO: Sept. 1994

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	700.00	700.00	11(a)(i)
ii. Unitemized	1,840.00	1,840.00	11(a)(ii)
iii. Total (add i and ii) ➤	2,540.00	2,540.00	11(a)(iii)
b. Political Party Committees	-	-	11(b)
c. Other Political Committees (such as PACs)		-	11(c)
d. Total Contributions (add a iii, b and c) ➤	2,540.00	2,540.00	11(d)
12. Transfers From Affiliated/Other Party Committees	-	-	12
13. All Loans Received			13
14. Loan Repayments Received	-	-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-	-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)	8.61	23.45	17
18. Transfers from Nonfederal Account for Joint Activity	-	-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17 and 18) ➤	2,548.61	2,563.45	19
20. Total Federal Receipts (subtract line 16 from line 19) ➤	2,548.61	2,563.45	20
II. Disbursements			
21. Operating Expenditures:		-	
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	-		21(a)(i)
ii. Non-Federal Share	-	-	21(a)(ii)
b. Other Federal Operating Expenditures	-	-	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤		-	21(c)
22. Transfers to Affiliated/Other Party Committees	-	-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,550.00	1,550.00	23
24. Independent Expenditures (use Schedule E)	-	-	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-	-	25
26. Loan Repayments Made	-	-	26
27. Loans Made	-	-	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	150.00	150.00	28(a)
b. Political Party Committees	-	-	28(b)
c. Other Political Committees (such as PACs)	-	-	28(c)
d. Total Contribution Refunds (add a, b and c) ➤	150.00	150.00	28(d)
29. Other Disbursements	-	-	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	1500.00	1,700.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	1500.00	1,700.00	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	2,390.00	2,390.00	32
33. Total Contribution Refunds (from line 28d)	150.00	150.00	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	2,240.00	2,240.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤		-	35
36. Offsets to Operating Expenditures (from line 15)		-	36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	-		37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE | OF

FOR LINE NUMBER

Any information copied from such Reports and Statements may not be sold or used by any person for the purposes 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)

Florida Farm Bureau Federation FEDPAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Carl B. Loop, Jr. 3530 Silvery Ln. Jacksonville, Fl 37217	Florida Farm Bureau President	8/23/94	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 250.00		
B. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Thomas Lee 5542 Dunn Ave. Jacksonville, Fl 32218	Self Insurance Agent	8/31/94	250.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 250.00		
C. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Len Strong 13121 N. Military Tr. Delray Bch, Fl 33484	Self Insurance Agent	9/2/94	200.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 200.00		
D. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year to Date > $		
E. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
F. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	**Name of Employer / Occupation**	**Date (month, day, year)**	**Amount of Each Receipt this Period**
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

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

TOTAL This Period (last page this line number only) . . . . . > 700.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)
Florida Farm Bureau Federation FEDPAC

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Pete Peterson P.O. Box 3186 Tallahassee, Fl 32315-3186	Pete Peterson House Dist.2 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	7/8/94	100.00
B. Full Name, Mailing Address and ZIP Code Friends of Connie Mack P.O. Box 1835 Suite 315 Orlando, Fl 32801	Purpose of Disbursement U.S. Senate Fl Connie Mack 500.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 7/12/94	Amount of Each Disbursement This Period 500.00
C. Full Name, Mailing Address and ZIP Code Thurman For Congress P.O. Box 5058 Inverness, Fl 34450-5058	Purpose of Disbursement Karen Thurman House Dist 5 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 7/15/94	Amount of Each Disbursement This Period 100.00
D. Full Name, Mailing Address and ZIP Code Thurman For Congress P.O. Box 5058 Inverness, Fl 34450-5058	Purpose of Disbursement Karen Thurman House Dist. 5 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 8/25/94	Amount of Each Disbursement This Period 500.00
E. Full Name, Mailing Address and ZIP Code Countdown to Majority 605 E Robinson St. Suite 305 Orlando, Fl 32801	Purpose of Disbursement Bill McCollum House DIst.8 150.00 Disbursement for: [ ] Primary [x] General [ ] Other (specify)	Date (month, day, year) 9/20/94	Amount of Each Disbursement This Period 150.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	1,350.00

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Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 10-7-94
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

JMY
PREPARER

10-12-94
DATE PREPARED

FEC FORM 70-2 (12/92)

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