

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

FEB 2 2 03 PM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

NAME OF CONTRIBUTOR OR DONOR
C00012328 120397 P 266
JAMES E TERRILL
FLORIDA SUGAR CANE LEAGUE PAC
215 SOUTH LOPEZ DRAWER 1208
CLEWISTON FL 33440

2. FEC IDENTIFICATION NUMBER
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

- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
 30-Day Post-Election 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 <u>7/1/97</u> through <u>12/31/97</u>			
6. (a)	Cash on Hand January 1, 19 <u>97</u>		\$ 7,341.71
(b)	Cash on Hand at Beginning of Reporting Period	\$ 31.96	
(c)	Total Receipts (from Line 19)	\$ 9,800.00	\$ 82,744.20
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 9,831.96	\$ 90,085.91
7.	Total Disbursements (from Line 30)	\$ 7,897.76	\$ 88,151.71
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 1,934.20	\$ 1,934.20
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Tel Free 800-424-9530 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$	

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

Type or Print Name of Treasurer
James E. Terrill

Signature of Treasurer

James E. Terrill

Date

1/28/98

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

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FEC FORM 3X
(revised 9/93)

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

(revised 1/1/81)

NAME OF COMMITTEE FLORIDA SUGAR CANE LEAGUE PAC		REPORT COVERING PERIOD FROM 7/1/97 TO 12/31/97	
		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)	5,800.00	78,725.00	11(a)
ii. Unitemized			11(b)
iii. Total (add i and ii) >	5,800.00	78,725.00	11(c)
b. Political Party Committees			11(d)
c. Other Political Committees (such as PACs)	4,000.00	4,000.00	11(e)
d. Total Contributions (add a iii, b and c) >	9,800.00	82,725.00	11(f)
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.)	-0-	19.20	17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	9,800.00	82,744.20	19
20. Total Federal Receipts (subtract line 16 from line 19) >			20
II Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			21(a)
i. Federal Share			21(b)
ii. Non-Federal Share			21(c)
b. Other Federal Operating Expenditures	-0-	-0-	21(d)
c. Total Operating Expenditures (add a i, a ii, and b) >	-0-	-0-	21(e)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	7,897.76	88,151.71	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. Individual/Persons Other Than Political Committees			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) >			28(d)
29. Other Disbursements			29
30. Total Disbursements (add 21e, 22, 23, 24, 25, 26, 27, 28d, and 29) >	7,897.76	88,151.71	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >			31
III Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11f)	9,800.00	82,725.00	32
33. Total Contribution Refunds (from line 28d)	-0-	-0-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	9,800.00	82,725.00	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-0-	-0-	35
36. Offsets to Operating Expenditures (from line 15)	-0-	-0-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	-0-	-0-	37

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)

FLORIDA SUGAR CANE LEAGUE PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
The John Christensen for Congress Committee 12129 Darnley Road Woodbridge, VA 22129	NE Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/16/97	500.00
B. Full Name, Mailing Address and ZIP Code Gibbons for Congress c/o 811 Chetworth Place Alexandria, VA 22314	Jim Gibbons NV Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/16/97	500.00
C. Full Name, Mailing Address and ZIP Code Friends of Mark Foley P.O. Box 30505 Palm Beach Gardens, FL 33420	FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/16/97	500.00
D. Full Name, Mailing Address and ZIP Code Friends of Chris Dodd 203 C Street, N.E. Washington, DC 20002	CT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/22/97	1,000.00
E. Full Name, Mailing Address and ZIP Code Thurman for Congress c/o Ellen Mazer 3610 38th St., N.W., Ste. P270 Washington, DC 20016	Karen Thurman FL Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/97	500.00
F. Full Name, Mailing Address and ZIP Code Scott for Congress P.O. Box 251 Newport News, VA 23607	Bobby Scott VA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	7/31/97	500.00
G. Full Name, Mailing Address and ZIP Code Friends of Blance Lincoln 44 Canal Center Plaza, Ste. 400 Alexandria, VA 23607	AR Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/25/97	500.00
H. Full Name, Mailing Address and ZIP Code Montanans for Rick Hill P.O. Box 1256 Helena, WA 59624	MT Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	9/29/97	500.00
I. Full Name, Mailing Address and ZIP Code Florida Sugar Cane League P.O. Drawer 1208 Clewiston, FL 33440	In-kind cont. for Steve Rotham (NJ) reimbursd for breakfast Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	141.76

SUBTOTAL of Disbursements This Page (optional) \$4,641.76

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

FLORIDA SUGAR CANE LEAGUE PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Cubin for Congress P. O. Box 4657 Casper, WY 82604	Barbara Cubin WY. Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	500.00
B. Full Name, Mailing Address and ZIP Code Lucille Roybal-Allard for Congress P. O. Box 2884 Washington, DC 20013	GA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	500.00
C. Full Name, Mailing Address and ZIP Code Nathan Deal for Congress P. O. Box 16021 Alexandria, VA 22302	GA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	500.00
D. Full Name, Mailing Address and ZIP Code Hefley for Congress 3001 Park Center Dr. Ste. 419 Alexandria, VA 22302	CO Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	500.00
E. Full Name, Mailing Address and ZIP Code Citizens for Ron Klink P. O. Box 75214 Washington, DC 20013	PA Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	500.00
F. Full Name, Mailing Address and ZIP Code Levin for Congress Committee 421 New Jersey Ave., SE Washington, DC 20003	NI Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/7/97	500.00
G. Full Name, Mailing Address and ZIP Code Friends of Connie Mack 1311 N. Westshore Blvd., Ste. 313 Tampa, FL 33607	FL Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) In-kind Contrib.	11/3/97	256.00
H. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional) 3,256.00

TOTAL This Period (last page this line number only) 7,897.76

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11a.i.

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NAME OF COMMITTEE (in full)

FLORIDA SUGAR CANE LEAGUE PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Dickson Route 2, Box 159 E Clewiston, FL 33440 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Dickson Enterprises Occupation: Farmer Aggregate Year-to-Date > \$ 5	7/24/97	800.00
B. Full Name, Mailing Address and ZIP Code A. Recio 400 N. Flager Dr., Apt. 2002 West Palm Beach, FL 33401 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Osceola Farms Occupation: Sr. Vice President Aggregate Year-to-Date > \$	10/7/97	3,000.00
C. Full Name, Mailing Address and ZIP Code Donald W. Carson 316 Royal Poinciana Plaza Palm Beach, FL 33480 Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Flo-Sun Occupation: Executive Vice President Aggregate Year-to-Date > \$ 5	12/29/97	2,000.00
D. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$5,800.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

FLORIDA SUGAR CANE LEAGUE PAC

A. Full Name, Mailing Address and ZIP Code King Ranch PAC - Federal P.O. Box 1090 Kingsville, TX 78363	Name of Employer N/A	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Political Committee	6/26/97	4,000.00
Aggregate Year-to-Date > \$			
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation		
Aggregate Year-to-Date > \$			

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

\$4,000.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/28/98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>AW</i> PREPARER	 2/2/98 DATE PREPARED