

RECEIVED  
FEC MAIL ROOM



**POLARIS**<sup>®</sup>

2001 SEP -4 A 10 21

**Polaris Industries Inc.**  
2100 Highway 55  
Medina, Minnesota 55340-9770  
763-542-0500  
763-542-0599 fax

August 30, 2001

Public Records Office  
Federal Election Commission  
999 E Street, N.W.  
Washington, D.C. 20463

Re: Polaris Industries  
Political Participation  
Program

Dear Sir/Madam:

This letter is in response to your letter dated August 22, 2001 (copy enclosed) regarding the Report of Receipts and Disbursements for 10/1/00 to 11/27/00 for the above-named political action committee.

It is stated in your letter that we exceeded the \$5,000 per candidate per election limitation with respect to the 2000 senatorial campaign for Rod Grams. We apologize for this oversight. We were mistakenly under the impression that the \$5,000 limitation was an annual limitation.

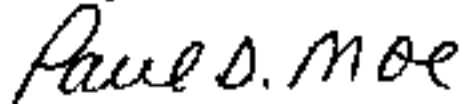
The excess disbursement to Mr. Grams amounted to \$1,000. Per instructions received from your office by telephone, we have written a letter to the campaign committee for Mr. Grams, requesting that the \$1,000 be returned to us. We have enclosed a copy of the letter for your files.

It is also stated in your letter that we have included activity in this report that is outside of the reporting period. The activity in question pertains to our disbursements shown on Schedule B. As all of our checks were written on September 29, 2000, that is the date we entered for each of the disbursements shown on Schedule B. These disbursements are being shown on the 10/1/00 to 11/27/00 report because the checks for these disbursements actually cleared our bank account during this period. We have always completed our reports in this manner. Again, per telephone instructions received from your office, we have changed the disbursement dates on our Schedule B to reflect the date the checks were actually cashed. We are enclosing an amended report for the

10/1/00 to 11/27/00 period, with the only changes being made to the Schedule B as previously mentioned.

We apologize for any inconvenience we have caused you. Please contact the undersigned directly if you have any questions or if you require any additional information.

Sincerely,

A handwritten signature in cursive script that reads "Paul D. Moe".

Paul D. Moe, Tax Director  
(763) 542-0571



FEDERAL ELECTION COMMISSION  
WASHINGTON, D.C. 20463

RQ-2

RECEIVED  
FEC MAIL ROOM  
2001 SEP -4 A 10:21

Mary Zins, Treasurer  
Polaris Industries Inc. Political  
Participation Program  
2100 Highway 55  
Medina, MN 55340

AUG 22 2001

Identification Number: C00279497

Reference: 30 Day Post-General Report (10/1/00-11/28/00)

Dear Ms. Zins:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B of your report (pertinent portion(s) attached) discloses a contribution(s) which appears to exceed the limits set forth in the Act. 2 U.S.C. §441a(a) precludes a multicandidate committee and its affiliates from making a contribution to a candidate for federal office in excess of \$5,000 per election.

If the contribution(s) in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information. If you have made an excessive contribution, you should notify the recipient and request a refund of the amount in excess of \$5,000 and/or notify the recipient in writing of your redesignation of the contribution. In the best interest of your committee, all refunds and redesignations should be made within sixty days of the treasurer's receipt of the contribution(s).

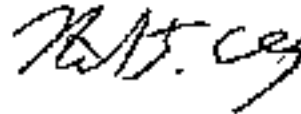
Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund or redesignation request sent to the recipient committee(s). In addition, any refunds should be disclosed on Schedule A supporting Line 16 of the report covering the period during which they are received. Any redesignations should be disclosed as memo entries on Schedule B supporting Line 23 of the report covering the period during which the redesignation is made. 11 CFR §110.1(b)

Although the Commission may take further legal action regarding the excessive contribution(s), your prompt action in obtaining a refund and/or redesignating the contribution(s) will be taken into consideration.

-Your report discloses activity that falls outside the reporting period. Please amend this report by including only the financial transactions that occurred between 10/1/00 and 11/28/00. Any activity occurring outside this reporting period should be included in the appropriate report(s). 2 U.S.C. §434(b)

A written response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Nicholas T. Ebinger  
Reports Analyst  
Reports Analysis Division

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 7 OF 1  
FOR LINE NUMBER 23

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) *Polaris Industries Inc. Political Participation Program*

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Gov. Bush Pres Exploratory Committee PO Box 1902 Austin, TX 78767-9957</i>	<i>exploratory Committee</i> Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>7/21/99</i>	<i>1,000.00</i>
<i>Bush for President PO Box 1263 South Gate, MI 48195</i>	<i>George Bush Presidential Campaign</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <i>YTD contribs \$4,000</i>	<i>10/7/99</i>	<i>4,000.00</i>
<i>Grams for Senate 507 Capitol Ct. NE #100 Washington, D.C. 20002</i>	<i>Rod Grams Senatorial Campaign</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) <i>YTD contribs \$1,000</i>	<i>11/4/99</i>	<i>1,000.00</i>
<i>Luther for Congress 1399 Geneva Ave. N. Barkdale, MN 55128</i>	<i>Bill Luther Senatorial Campaign</i> Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<i>11/23/99</i>	<i>1,000.00</i>
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period

VTE

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

*7,000.00*

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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) *Polans Industries Inc. Political Participation Program*

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
<i>Collin Peterson for Congress P.O. Box 265 Detroit Lakes, MN 56502</i>	<i>Congressional Campaign</i>	<i>9/29/00</i>	<i>1,000.00</i>
<i>Ramstad Volunteer Comm. 800 Penn Ave. S. Bloomington, MN 55431</i>	<i>Congressional Campaign</i>	<i>9/29/00</i>	<i>1,000.00</i>
<i>Rod Grams for Senate 2013 2nd Ave. N. Anoka, MN 55303</i>	<i>Congressional Campaign</i>	<i>9/29/00</i>	<i>5,000.00</i>
<i>Bill Luther for Congress 1399 Geneva Ave. N. Oakdale, MN 55128</i>	<i>Congressional Campaign</i>	<i>9/29/00</i>	<i>1,000.00</i>
<i>Tom Batham for Congress P.O. Box 174 Sioux City, IA 51102</i>	<i>Congressional Campaign</i>	<i>9/29/00</i>	<i>1,000.00</i>
<i>Kadaneuch for Congress 21st Brookfield Corp. Dr. Chantilly, Virginia 20151</i>	<i>Congressional Campaign</i>	<i>9/19/00</i>	<i>1,000.00</i>
<i>Tom Daschle P.O. Box 1656 Sioux Falls, SD 57015</i>	<i>Congressional Campaign</i>	<i>9/29/00</i>	<i>1,000.00</i>
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

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SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

*11,000.00*

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2001 SEP -4 A 10: 27

COPY

POLARIS INDUSTRIES  
POLITICAL PARTICIPATION PROGRAM  
2100 Highway 55  
Medina, Minnesota 55340

August 30, 2001

Senator Rod Grams  
P.O. Box 1029  
320 East Main Street  
Anoka, MN 55303

Dear Senator Grams:

The Polaris Industries Political Action Committee (PAC) recently filed its required quarterly report with the Federal Election Commission (FEC).

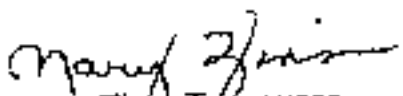
Today, we received notification from the FEC that the Polaris PAC exceeded its contribution limit to your 2000 election campaign. FEC regulation, Act. 2 U.S.C. &44a(a) "precludes a multicandidate committee and its affiliates from making a contribution to a candidate for federal office in excess of \$5,000 *per election*".

On November 4, 1999 the Polaris PAC made a \$1,000 contribution to your campaign followed by a \$5,000 contribution on September 29, 2000. Even though the contributions were made in separate years, the FEC views both payments as 2000 election contributions.

Therefore, Senator Grams, I ask that the \$1,000 campaign overpayment be returned to the Polaris Industries Political Participation Program at the address shown above.

I sincerely apologize for this contribution oversight. If you have further questions, please do not hesitate to call me at (763) 542-0530.

Regards,

  
Mary Zins, Treasurer  
Polaris Industries Political Participation Program

Cc: Federal Election Commission

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEC MAIL ROOM

2001 SEP -4 A 10:21

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) Polaris Industries Inc. Political Participation Program

ADDRESS (number and street)  Check if different than previously reported  
2100 Highway 55

CITY, STATE and ZIP CODE  
Medina, MN 55340

2. FEC IDENTIFICATION NUMBER  
C 00279497

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 11/7/00 in the State of Minnesota

(b) Is this Report an Amendment?  YES  NO

SUMMARY		COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period	<u>10/1/00</u> through <u>11/27/00</u>		
6. (a) Cash on Hand January 1, <u>2000</u>			\$27,838.78
(b) Cash on Hand at Beginning of Reporting Period		\$ 37,139.67	
(c) Total Receipts (from Line 19)		\$ 4,980.15	\$ 25,281.04
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 42,119.82	\$ 53,119.82
7. Total Disbursements (from Line 30)		\$ 11,000.00	\$ 22,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 31,119.82	\$ 31,119.82
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)		\$ —	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)		\$ —	

For further information contact:  
Federal Election Commission  
400 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-6530  
Local 202-694-1100

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  
Mary Zins

Signature of Treasurer  
Mary Zins

Date  
8/30/01

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



# DETAILED SUMMARY PAC

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

NAME OF COMMITTEE: Polaris Industries Inc.  
Political Participation Program

REPORT COVERING PERIOD  
FROM 10/1/00 TO 11/27/00

	COLUMN A Total This Period	COLUMN B Calendar Year	
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	2,190.00	11,936.00	11(a)(i)
ii. Unitemized	2,770.15	13,345.04	11(a)(ii)
iii. Total (add i and ii) >	4,980.15	25,281.04	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a ii, b and c) >	4,980.15	25,281.04	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.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	4,980.15	25,281.04	19
20. Total Federal Receipts (subtract line 18 from line 19) >	4,980.15	25,281.04	20
<b>II. Disbursements</b>			
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	11,000.00	22,000.00	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. 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 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	11,000.00	22,000.00	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	11,000.00	22,000.00	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans)(from line 11d)	4,980.15	25,281.04	32
33. Total Contribution Refunds (from line 28d)	—	—	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	4,980.15	25,281.04	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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 7 OF 5  
FOR LINE NUMBER 11a(1)

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NAME OF COMMITTEE (in Full)

Polaris Industries Inc.  
Political Participation Program

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
W. Hall Wendel, Jr. 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Chairman	Aggregate Year-to-Date: \$ 1,440.00	(60.00 bi-weekly)
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Claude Picard 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date: \$ 480.00	(20.00 bi-weekly)
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Jeff Bjorkman 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date: \$ 480.00	(20.00 bi-weekly)
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Charles Baxter 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date: \$ 480.00	(20.00 bi-weekly)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mike Malone 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date: \$ 290.00	(15.00 bi-weekly)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Richard Strenge 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date: \$ 360.00	(15.00 bi-weekly)
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Tim DeJong 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	75.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date: \$ 360.00	(15.00 bi-weekly)

SUBTOTAL of Receipts This Page (optional)

825.00

TOTAL This Period (last page this line number only)

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 5  
FOR LINE NUMBER 119(1)

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NAME OF COMMITTEE (in Full)

Polaris Industries Inc.  
Political Participation Program

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Gary Olson 2100 Highway 55 Medina, MN 55340 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Ind. Inc. Occupation: Manager Aggregate Year-to-Date > \$ 390.00	Payroll Deduction 18.00 bi-weekly	90.00
Albert Peras 2100 Highway 55 Medina, MN 55340 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Ind. Inc. Occupation: Manager Aggregate Year-to-Date > \$ 290.00	Payroll Deduction 15.00 bi-weekly	75.00
David Thompson 2100 Highway 55 Medina, MN 55340 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Ind. Inc. Occupation: Manager Aggregate Year-to-Date > \$ 386.00	Payroll Deduction 18.00 bi-weekly	90.00
Michael Triney 2100 Highway 55 Medina, MN 55340 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Ind. Inc. Occupation: Manager Aggregate Year-to-Date > \$ 340.00	Payroll Deduction 20.00 bi-weekly	100.00
Norm Berg 2100 Highway 55 Medina, MN 55340 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Ind. Inc. Occupation: Manager Aggregate Year-to-Date > \$ 205.00	Payroll Deduction 10.00 bi-weekly	50.00
James Berratt 2100 Highway 55 Medina, MN 55340 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Ind. Inc. Occupation: Manager Aggregate Year-to-Date > \$ 240.00	Payroll Deduction 10.00 bi-weekly	50.00
Charles Crane 2100 Highway 55 Medina, MN 55340 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Polaris Ind. Inc. Occupation: Manager Aggregate Year-to-Date > \$ 200.00	Payroll Deduction 20.00 bi-weekly	100.00

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

555.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 3 OF 5  
FOR LINE NUMBER 119(1)

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NAME OF COMMITTEE (in Full)

Polaris Industries Inc.  
Political Participation Program

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
William Fisher 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	125.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 250.00	(25.00 bi-weekly)
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mitchell Johnson 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 200.00	(20.00 bi-weekly)
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Mark Kart 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	85.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 212.00	(17.00 bi-weekly)
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Richard Kobes 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 200.00	(20.00 bi-weekly)
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Robert Kulig 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 200.00	(20.00 bi-weekly)
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Bennett Morgan 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: Manager	Aggregate Year-to-Date > \$ 228.00	(20.00 bi-weekly)
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt This Period
Ed Skomroch 2100 Highway 55 Medina, MN 55340	Polaris Ind. Inc.	Payroll Deduction	100.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation: VP	Aggregate Year-to-Date > \$ 212.00	(20.00 bi-weekly)

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

710.00

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

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 4 OF 5  
FOR LINE NUMBER 119(1)

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)			
Polan's Industries Inc. Political Participation Program			
A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mary Zins 2100 Highway 55 Medina, MN 55340	Polan's Ind. Inc.	Payroll Deduction	100.00 (20.00 bi-weekly)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$	
		270.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Michael Jonikas 2100 Highway 55 Medina, MN 55340	Polan's Ind. Inc.	7/00	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$	
		500.00	
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
John Corness 2100 Highway 55 Medina, MN 55340	Polan's Ind. Inc.	7/00	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation VP	Aggregate Year-to-Date > \$	
		1,000.00	
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Larae Krahn 2100 Highway 55 Medina, MN 55340	Polan's Ind. Inc.	7/00	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$	
		250.00	
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Mark McCormick 2100 Highway 55 Medina, MN 55340	Polan's Ind. Inc.	7/00	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Controller	Aggregate Year-to-Date > \$	
		600.00	
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Kevin Ness 2100 Highway 55 Medina, MN 55340	Polan's Ind. Inc.	7/00	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Manager	Aggregate Year-to-Date > \$	
		350.00	
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert Nygaard 2100 Highway 55 Medina, MN 55340	Polan's Ind. Inc.	7/00	- 0 -
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation Gen. Mgr.	Aggregate Year-to-Date > \$	
		250.00	
SUBTOTAL of Receipts This Page (optional)			100.00
TOTAL This Period (last page this line number only)			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 5 OF 5  
FOR LINE NUMBER 779(1)

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)		Polaris Industries Inc. Political Participation Program		
A. Full Name, Mailing Address and ZIP Code Jim O'Neill 2100 Highway 55 Medina, MN 55340		Name of Employer Polaris Ind. Inc.	Date (month, day, year) 7/00	Amount of Each Receipt this Period -0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	Aggregate Year-to-Date \$ 400.00	
B. Full Name, Mailing Address and ZIP Code Charles Ramsey 2100 Highway 55 Medina, MN 55340		Name of Employer Polaris Ind. Inc.	Date (month, day, year) 7/00	Amount of Each Receipt this Period -0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation Manager	Aggregate Year-to-Date \$ 400.00	
C. Full Name, Mailing Address and ZIP Code Richard Pollack 2100 Highway 55 Medina, MN 55340		Name of Employer Polaris Ind. Inc.	Date (month, day, year) 7/00	Amount of Each Receipt this Period -0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation VP	Aggregate Year-to-Date \$ 500.00	
D. Full Name, Mailing Address and ZIP Code Thomas Tiller 2100 Highway 55 Medina, MN 55340		Name of Employer Polaris Ind. Inc.	Date (month, day, year) 7/00	Amount of Each Receipt this Period -0-
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation President	Aggregate Year-to-Date \$ 3,000.00	
E. Full Name, Mailing Address and ZIP Code 2100 Highway 55 Medina, MN 55340		Name of Employer Polaris Ind. Inc.	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 2100 Highway 55 Medina, MN 55340		Name of Employer Polaris Ind. Inc.	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 2100 Highway 55 Medina, MN 55340		Name of Employer Polaris Ind. Inc.	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)				2,190.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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)			
Polaris Industries Inc. Political Participation Program			
A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Colin Peterson for Congress P.O. Box 265 Detroit Lakes, MN 56502	Congressional Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/16/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ramstad Volunteer Comm. 8100 Penn Ave. S. Bloomington, MN 55431	Congressional Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/13/00	1,000.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Rod Grams for Senate 2013 2nd Ave. N Anoka, MN 55303	Congressional Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/17/00	5,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Luther for Congress 1399 Geneva Ave. N. Oakdale, MN 55128	Congressional Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/10/00	1,000.00
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Matham for Congress P.O. Box 174 Sioux City, IA 51102	Congressional Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/11/00	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Kadavovich for Congress 4451 Brookfield Corp. Dr. Chantilly, Virginia 20151	Congressional Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/6/00	1,000.00
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Tom Daschle P.O. Box 1656 Sioux Falls, SD 57015	Congressional Campaign Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	10/12/00	1,000.00
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			
TOTAL This Period (last page this line number only)			11,000.00

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 checked="" type="checkbox"/> First Class Mail	POSTMARKED 8-31-01
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<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>Jmo</i> PREPARER	 9-4-01 DATE PREPARED