

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

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 Miss Kelsey A Swango

Signature of Treasurer Miss Kelsey A Swango [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/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="2012"/>	<input type="text" value="4567.92"/>	<input type="text" value="4567.92"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="34998.15"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="11215.00"/>	<input type="text" value="59108.78"/>
(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="46213.15"/>	<input type="text" value="63676.70"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4020.38"/>	<input type="text" value="21483.93"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="42192.77"/>	<input type="text" value="42192.77"/>
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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 04 / 01 / 2012 To: M M / D D / Y Y Y Y 04 / 30 / 2012

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).....	8850.00	29152.60
(ii) Unitemized	2365.00	7456.18
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11215.00	36608.78
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	22500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11215.00	59108.78
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total 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))..... ▶	11215.00	59108.78
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11215.00	59108.78

DETAILED SUMMARY PAGE

of Disbursements

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	20.38	6483.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	20.38	6483.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	15000.00
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)) ..	4020.38	21483.93
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4020.38	21483.93

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)	11215.00	59108.78
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11215.00	59108.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	20.38	6483.93
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	20.38	6483.93

**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 6 OF 14
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Brent Ericson
 Full Name (Last, First, Middle Initial)
 Mailing Address 2204 Tori Ann Ln
 City Bloomington State IL Zip Code 61704-3420
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Growmark, Inc. Occupation Vice President, Grain Division
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2012
Transaction ID : A211BFF3707C747A08D2
 Amount of Each Receipt this Period
 250.00
 Receipt

B. Shelly Kruse
 Full Name (Last, First, Middle Initial)
 Mailing Address 2109 Sinclair Ct
 City Bloomington State IL Zip Code 61704-4600
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Growmark, Inc. Occupation Vice President, Midwest Retail and Acq
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2012
Transaction ID : A6939DF607F854C82A5E
 Amount of Each Receipt this Period
 250.00
 Receipt

c. Mr. Daniel Kelley
 Full Name (Last, First, Middle Initial)
 Mailing Address 2633 N Linden St
 City Normal State IL Zip Code 61761-9404
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Growmark & Cobank Occupation Chairman of the Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 405.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 02 / 2012
Transaction ID : A43A21068F16D4F0E8BA
 Amount of Each Receipt this Period
 350.00
 Receipt

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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 7 OF 14
	<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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial) A. Marshall Bohbrink		Date of Receipt
Mailing Address 3107 Sable Oaks Rd		<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bloomington	IL	61704-4850
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A27C8D16D6B494232B68
Name of Employer	Occupation	Amount of Each Receipt this Period
Growmark, Inc.	CFO	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Receipt
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Kevin Carroll		Date of Receipt
Mailing Address 3108 Wisteria Ln		<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bloomington	IL	61704-2771
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : A58AE5C5DB4164223BE7
Name of Employer	Occupation	Amount of Each Receipt this Period
Growmark, Inc.	Vice President, Energy	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Receipt
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Gary A Swango		Date of Receipt
Mailing Address 2102 Berrywood Ln		<input type="text" value="04"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
Bloomington	IL	61704-2437
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : AC41BD14B6F2647998DC
Name of Employer	Occupation	Amount of Each Receipt this Period
Growmark, Inc.	VP, Human Resources and Compliance	<input type="text" value="250.00"/>
Receipt For:	Aggregate Year-to-Date ▼	Receipt
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="750.00"/>
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 14
<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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Chet Esther
Full Name (Last, First, Middle Initial)
Mailing Address RR 1 Box 91
City Frederick State IL Zip Code 62639-9741
FEC ID number of contributing federal political committee. **C**
Name of Employer Growmark, Inc. Occupation Director
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : **A3F2AEA7382C14EFA962**
Amount of Each Receipt this Period 250.00
Receipt

B. Steven Buckalew
Full Name (Last, First, Middle Initial)
Mailing Address 104 Watson Rd
City Centerville State MD Zip Code 21617-2310
FEC ID number of contributing federal political committee. **C**
Name of Employer Growmark, Inc. Occupation Vice President, Eastern Retail
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : **AEADFC905C237440FA78**
Amount of Each Receipt this Period 250.00
Receipt

C. Dennis Farmer
Full Name (Last, First, Middle Initial)
Mailing Address 2105 Berry Ln
City Bloomington State IL Zip Code 61704-2791
FEC ID number of contributing federal political committee. **C**
Name of Employer Growmark, Inc. Occupation Senior VP, Member Services & Retail
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : **AA7F6C7E10D224BA4AFA**
Amount of Each Receipt this Period 250.00
Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00
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 14
<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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

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

Mailing Address 30 Jasper Ct

City Morton State IL Zip Code 61550-1150

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

Name of Employer Growmark, Inc. Occupation Vice President, Agronomy

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : A3D470C63D6344C53B10

Amount of Each Receipt this Period 250.00

Receipt

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

Mailing Address 4 Scofield Ct

City Bloomington State IL Zip Code 61704-4809

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

Name of Employer Growmark, Inc. Occupation VP & General Counsel

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : AF3DE992DAA4C4C448E0

Amount of Each Receipt this Period 250.00

Receipt

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

Mailing Address 117 Cheltenham Dr

City Normal State IL Zip Code 61761-2742

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

Name of Employer Growmark, Inc. Occupation Controller

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : AB183E00D8DB6484C80A

Amount of Each Receipt this Period 250.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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 14
	<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"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

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

Mailing Address 3111 Bristol Dr

City Bloomington State IL Zip Code 61704-1202

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

Name of Employer Growmark, Inc. Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : A08A8BB4029824908BE4

Amount of Each Receipt this Period 1000.00

Receipt

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

Mailing Address 1007 County Road 61822

City Champaign State IL Zip Code 61822-0000

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

Name of Employer Growmark, Inc. Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : A3D4CEA5780E544729B6

Amount of Each Receipt this Period 250.00

Receipt

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

Mailing Address 22962 County Road 3010 E

City Forest City State IL Zip Code 61532-9448

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

Name of Employer Growmark, Inc. Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : A915EE1CAAA9441CF993

Amount of Each Receipt this Period 250.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 1500.00

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 14
	<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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Mike K Woods
Full Name (Last, First, Middle Initial)

Mailing Address 15951 Thunderbird Ct

City Bloomington State IL Zip Code 61705-5588

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

Name of Employer Growmark, Inc. Occupation Executive Director, Strategic Research

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 02 / 2012
Transaction ID : AD95481FC2C464A3592B

Amount of Each Receipt this Period 250.00

Receipt

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

Mailing Address 8009 Stringtown Station Rd

City Lohman State MO Zip Code 65053-9554

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

Name of Employer Mfa Incorporated Occupation Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2012
Transaction ID : A4F796E093C4F422696F

Amount of Each Receipt this Period 300.00

Receipt

C. Mr. Billy Streeter
Full Name (Last, First, Middle Initial)

Mailing Address 4000 Day Flower Ct

City Columbia State MO Zip Code 65203-6110

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

Name of Employer Mfa Incorporated Occupation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 04 / 16 / 2012
Transaction ID : A8145246DCC704B59861

Amount of Each Receipt this Period 300.00

Receipt

SUBTOTAL of Receipts This Page (optional)..... ▶ 850.00

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 14
	<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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

A. Don Mills
 Full Name (Last, First, Middle Initial)
 Mailing Address 4785 E 1260 Rd
 City El Dorado Springs State MO Zip Code 64744-7469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Mfa Incorporated Occupation Chairman of the Board
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012
Transaction ID : ADCBE5E9AE165464F868
 Amount of Each Receipt this Period
 300.00
 Receipt

B. David Callis
 Full Name (Last, First, Middle Initial)
 Mailing Address 1220 S Barrett Ave
 City Sedalia State MO Zip Code 65301-5336
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MFA Inc. Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012
Transaction ID : A40229F4FE5EF4653A38
 Amount of Each Receipt this Period
 300.00
 Receipt

C. Tim Lichte
 Full Name (Last, First, Middle Initial)
 Mailing Address 15106 Highway 24
 City Lexington State MO Zip Code 64067-8218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MFA Inc. Occupation Director
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 16 / 2012
Transaction ID : AF5368779512F4623B87
 Amount of Each Receipt this Period
 300.00
 Receipt

SUBTOTAL of Receipts This Page (optional).....▶	900.00
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 14
	<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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

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

Mailing Address 221 W 48th St
Apt 1901

City Kansas City State MO Zip Code 64112-4023

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

Name of Employer Dairy Farmers Of America Occupation President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1750.00

Date of Receipt
04 / 25 / 2012
Transaction ID : A07A623CE09864D35988

Amount of Each Receipt this Period
1000.00

Receipt

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

Mailing Address 4941 S 73rd St

City Lincoln State NE Zip Code 68516-4234

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

Name of Employer Nebraska Co-op Council Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
04 / 25 / 2012
Transaction ID : A6433CCB54DAE4ED0AA8

Amount of Each Receipt this Period
500.00

Receipt

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

Mailing Address PO Box 64101

City Saint Paul State MN Zip Code 55164-0101

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

Name of Employer Land Olakes Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 26 / 2012
Transaction ID : A42E1DB592A8843D9903

Amount of Each Receipt this Period
1000.00

Receipt

SUBTOTAL of Receipts This Page (optional).....	2500.00
TOTAL This Period (last page this line number only).....	8850.00

**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

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 COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. Graves For Congress

Mailing Address 4701 Nw 82nd Street

City Kansas City State MO Zip Code 64151

Purpose of Disbursement
Primary 2012

Candidate Name

Rep. Sam GRAVES

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MO District: 06

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	17	/	2012

Transaction ID : BC391DEBB644E4096A1F

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. Feinstein For Senate

Mailing Address 426 C St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
General 2012

Candidate Name

Sen. Dianne Feinstein

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	10	/	2012

Transaction ID : BA98A767C39B9407FBB0

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

4000.00

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

4000.00
