

LARRY PRESSLER
SOUTH DAKOTA

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

JAN 31 6 26 PM '95

HAND DELIVERED



U.S. SENATE
WASHINGTON, D.C.

JANUARY 31, 1995

Federal Election Commission
999 E Street, N.W.
Washington, DC 20463

Dear Madam or Sir:

Enclosed is the report of Receipts and Disbursements for the
Grassroots Victory Fund for the reporting period November 29
through December 31, 1994.

Sincerely,

A handwritten signature in cursive script that reads "Paul Arneson".

Paul Arneson
Treasurer
Grassroots Victory Fund

Enclosures

9503962006

REPORT OF RECEIPTS AND DISBURSEMENTS

HAND DELIVERED

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DIVISION

Jul 31 6 26 PM '95

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full) GRASSROOTS VICTORY FUND	
ADDRESS (number and street) <input checked="" type="checkbox"/> Check if different than previously reported P. O. Box 1779	
CITY, STATE and ZIP CODE Washington, DC 20013	
	2. FEC IDENTIFICATION NUMBER C00298695
	3. <input type="checkbox"/> 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:

- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> 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 _____

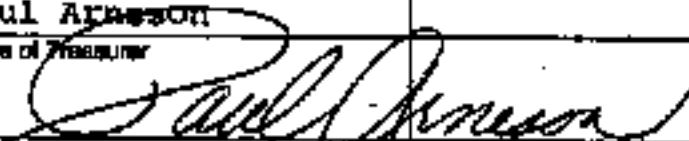
(b) Is this Report an Amendment? YES NO

SUMMARY		COLUMN A	COLUMN B
5. Covering Period	through	This Period	Calendar Year-to-Date
11/29/94	12/31/94		
6. (a) Cash on Hand January 1, 19__			
(b) Cash on Hand at Beginning of Reporting Period		\$ 14,001.33	
(c) Total Receipts (from Line 19)		\$ 2,300.00	\$ 31,925.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)		\$ 16,301.33	\$ 31,925.00
7. Total Disbursements (from Line 20)		\$ 12,488.01	\$ 28,111.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))		\$ 3,813.32	\$ 3,813.32
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		\$ ---	For further information contact: Federal Election Commission 1101 E Street, NW Washington, DC 20463 Toll 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
Paul Arneson

Signature of Treasurer



Date

01/31/95

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 4479g.

FEC FORM 3X
(revised 8/93)

9503962007

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 300**

(revised 1/1/91)

NAME OF COMMITTEE GRASSROOTS VICTORY FUND		REPORT COVERING PERIOD FROM 11/28/88 TO 11/28/89	
		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)		1,000.00	10,500.00
ii. Unitemized		100.00	2,725.00
iii. Total	(add i and ii) >	1,100.00	13,225.00
b. Political Party Committees		---	---
c. Other Political Committees (such as PACs)		1,000.00	18,500.00
d. Total Contributions	(add a ii, b and c) >	2,100.00	31,725.00
12. Transfers From Affiliated/Other Party Committees		---	---
13. All Loans Received		---	---
14. Loan Repayments Received		---	---
15. Offers To Operating Expenditures (Refunds, Rebates, etc.)		---	---
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		200.00	200.00
17. Other Federal Receipts (Dividends, Interest, etc.)		---	---
18. Transfers from Nonfederal Account for Joint Activity		---	---
19. Total Receipts	(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	2,300.00	31,925.00
20. Total Federal Receipts	(subtract line 18 from line 19) >	2,300.00	31,925.00
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share		---	---
ii. Non-Federal Share		---	---
b. Other Federal Operating Expenditures		12,488.01	15,511.68
c. Total Operating Expenditures	(add a i, ii, and b) >	12,488.01	15,511.68
22. Transfers to Affiliated/Other Party Committees		---	---
23. Contributions to Federal Candidates/Committees and Other Political Committees		---	2,300.00
24. Independent Expenditures (use Schedule E)		---	---
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		---	---
26. Loan Repayments Made		---	---
27. Loans Made		---	---
28. Refunds of Contributions To:			
a. Individual/Persons Other Than Political Committees		---	---
b. Political Party Committees		---	---
c. Other Political Committees (such as PACs)		---	---
d. Total Contribution Refunds	(add a, b and c) >	---	---
29. Other Disbursements		---	10,300.00
30. Total Disbursements	(add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	12,488.01	28,111.68
31. Total Federal Disbursements	(subtract line 21-a ii from line 30) >	12,488.01	28,111.68
III. Net Contributions/Operating Expenditure			
32. Total Contributions (other than loans)(from line 11d)		2,100.00	31,725.00
33. Total Contribution Refunds (from line 28d)		---	---
34. Net Contributions (other than loans)(subtract line 33 from line 32)		2,100.00	31,725.00
35. Total Federal Operating Expenditures	(add 21-a i and 21-b) >	12,488.01	15,511.68
36. Offers to Operating Expenditures (from line 15)		---	---
37. Net Operating Expenditure	(subtract line 36 from line 35) >	12,488.01	15,511.68

95039020008

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 1181

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)

GRASSROOTS VICTORY FUND

9503962009

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Robert G. Fessler 645 Park of Commerce Way Boca Raton, FL 33487	AGES Group Business Exec.	12/30/94	1,000.00
Receipt For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Occupation	Aggregate Year-to-Date > \$ 1,000.00	
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)

1,000.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11 C.

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NAME OF COMMITTEE (In Full)

GRASSROOTS VICTORY FUND

A. Full Name, Mailing Address and ZIP Code

West Publishing PAC
P. O. Box 64526
St. Paul, MN 55164-0526

Name of Employer

Date (month, day, year)
12/13/94

Amount of Each Receipt this Period
1,000.00

Occupation

Receipt For: Primary General
 Other (specify):

Aggregate Year-to-Date \$ 1,000.00

B. Full Name, Mailing Address and ZIP Code

Name of Employer

Date (month, day, year)

Amount of Each Receipt this Period

Occupation

Receipt For: Primary General
 Other (specify):

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

Occupation

Receipt For: Primary General
 Other (specify):

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

Occupation

Receipt For: Primary General
 Other (specify):

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

Occupation

Receipt For: Primary General
 Other (specify):

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

Occupation

Receipt For: Primary General
 Other (specify):

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

Occupation

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)

1,000.00

95039620010

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1
FOR LINE NUMBER 21 b.

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)

GRASSROOTS VICTORY FUND

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Business Aviation 3501 Aviation Avenue Sioux Falls, SD 57104-0197	charter expense Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/09/94	9,151.78
B. Full Name, Mailing Address and ZIP Code Larry Pressler 115 Fourth Street, SE Washington, DC 20003	reimb. travel, dinner & tele. expenses Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	12/29/94	3,300.00
C. 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
D. 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
E. 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
F. 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
G. 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
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

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

12,488.01

95039620011

**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

1-31-95

First Class Mail

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Registered/Certified Mail

POSTMARKED

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

JH
 PREPARER

2-1-95
 DATE PREPARED

95039620012