

Political Action Committee

RECEIVED
FEDERAL ELECTION COMMISSION
MAY 26 3 34 PM '98



193 North 5th Street
Honeyland, Minnesota 56564

PH: 218-236-4407
FAX: 218-236-4485


May 20, 1998

Federal Election Committee
1325 K Street Northwest
Washington, DC 20463

Gentlemen:

Enclosed is our monthly report for the period April 1, 1998, through April 30, 1998.

Sincerely,



Samuel S.M. Wai
Treasurer

SSMW/jd

Enclosure

cc: Office of the Secretary of State
180 State Office Building
St. Paul, MN 55155

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

COMM. FILED
ELECTION
MAIL ROOM

MAY 20 3 34 PM '98

USE FEC MAILING LABEL OR PRINT TYPE OR PRINT

1. NAME OF COMMITTEE (in full) American Crystal Sugar Political Action Committee	2. FEC IDENTIFICATION NUMBER C00110338
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 101 North Third Street	3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)
CITY, STATE and ZIP CODE Moorhead, MN 56560	

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 checked="" 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 This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>4-1-98</u> through <u>4-30-98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 134,769.47
(b) Cash on Hand at Beginning of Reporting Period	\$ 248,446.17	
(c) Total Receipts (from Line 19)	\$ 13,409.03	\$ 199,842.73
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 261,855.20	\$ 334,612.20
7. Total Disbursements (from Line 20)	\$ 36,001.54	\$ 108,758.54
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 225,853.66	\$ 225,853.66
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$	For further information contact: Federal Election Commission 888 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 Samuel S.M. Wai	Date
Signature of Treasurer 	5-20-98

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5437g.

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

(revised 1/1/81)

NAME OF COMMITTEE American Crystal Sugar Political Action Committee		REPORT COVERING PERIOD FROM 4-1-98 TO 4-30-98	
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees		11,126.00	129,568.65
i. Itemized (use Schedule A)		2,069.00	69,695.27
ii. Unitemized			
b. Total (add i and ii) >		13,195.00	199,263.92
c. Political Party Committees			
d. Other Political Committees (such as PACs)			
e. Total Contributions (add a c, b and d) >		13,195.00	199,263.92
12. Transfers From Affiliated/Other Party Committees			
13. All Loans Received			
14. Loan Repayments Received			
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			
17. Other Federal Receipts (Dividends, Interest, etc.)		214.03	578.81
18. Transfers from Nonfederal Account for Joint Activity			
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >		13,409.03	199,842.73
20. Total Federal Receipts (subtract line 18 from line 19) >		13,409.03	199,842.73
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			
ii. Non-Federal Share			507.00
b. Other Federal Operating Expenditures		-0-	
c. Total Operating Expenditures (add a i, a ii, and b) >			
22. Transfers to Affiliated/Other Party Committees			
23. Contributions to Federal Candidates/Committees and Other Political Committees		35,500.00	107,750.00
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. Individuals/Persons Other Than Political Committees		501.54	501.54
b. Political Party Committees			
c. Other Political Committees (such as PACs)			
d. Total Contribution Refunds (add a, b and c) >		501.54	501.54
29. Other Disbursements			
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >		36,001.54	108,758.54
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >		36,001.54	108,758.54
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans) (from line 11d)		13,195.00	199,263.92
33. Total Contribution Refunds (from line 28d)		501.54	501.54
34. Net Contributions (other than loans) (subtract line 33 from 32)		12,693.46	198,762.38
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >			
36. Offsets to Operating Expenditures (from line 15)			
37. Net Operating Expenditures (subtract line 36 from 35) >			

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE OF
1 | 4
FOR LINE NUMBER
11.a.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 the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
MICHAEL ASTRUP PO BOX 21B DILWORTH MN 58529	FARMER Occupation SELF EMPLOYED	4/22/98	\$315.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date: \$ 315.00	
B. Full Name, Mailing Address and Zip Code PATRICK E BENEDICT RR 1 BOX 9 SABIN MN 56580	FARMER Occupation SELF EMPLOYED	4/13/98	\$800.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date: \$ 1,015.00	
C. Full Name, Mailing Address and Zip Code PAUL R BERNSTROM PO BOX 813 HALLOCK MN 58728	FARMER Occupation SELF EMPLOYED	4/13/98	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date: \$ 300.00	
D. Full Name, Mailing Address and Zip Code BRIAN M BOHNSACK RR 1 BOX 80 HILLSBORO ND 58045	FARMER Occupation SELF EMPLOYED	4/7/98	\$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date: \$ 300.00	
E. Full Name, Mailing Address and Zip Code ROBERT J BOUCHER RR 1 BOX 83 CROOKSTON MN 56716	Name of Employer Occupation	Date (month, day, year) 4/7/98	Amount of Each Receipt this Period \$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date: \$ 300.00	
F. Full Name, Mailing Address and Zip Code DAVID W BRAATEN 16644 51ST ST SE KINDRED MN 58051	FARMER Occupation SELF EMPLOYED	Date (month, day, year) 4/18/98	Amount of Each Receipt this Period \$333.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date: \$ 333.00	
G. Full Name, Mailing Address and Zip Code BRUCE FANFULIK RR 1 BOX 16A EUCLID MN 56722	FARMER Occupation SELF EMPLOYED	Date (month, day, year) 4/9/98	Amount of Each Receipt this Period \$524.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Aggregate Year-to-Date: \$ 524.00	
SUBTOTAL of Receipts This Page (optional).....			\$2,872.00
TOTAL This Period (last page this line number only).....			

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER 11.a.i.

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NAME OF COMMITTEE (in Full)
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
JOHN FIELD PO BOX 74 STEPHEN MN 56757	FARMER Occupation SELF EMPLOYED	4/7/98	\$259.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 259.00		
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
PHILLIP D HAMRE RR 1 BOX 26 NIELSVILLE MN 56568	FARMER Occupation SELF EMPLOYED	4/1/98	\$362.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 362.00		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DAVID HAUGEN RR 1 BOX 118 ARGYLE MN 56713	FARMER Occupation SELF EMPLOYED	4/20/98	\$250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 250.00		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
DIANE L JOHNSON RR 3 BOX 11 ANGUS MN 56712	FARMER Occupation SELF EMPLOYED	4/15/98	\$600.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 600.00		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
CURT KNUTSON RR 1 BOX 82 FISHER MN 56723	FARMER Occupation SELF EMPLOYED	4/13/98	\$455.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 455.00		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
BENNIE J KRILE 414 PARK DRIVE GRAND FORKS NDE 58201	FARMER Occupation SELF EMPLOYED	4/7/98	\$436.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 436.00		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
RONALD McMARTIN 14854 82ND ST NE ST THOMAS ND 56276	FARMER Occupation SELF EMPLOYED	4/7/98	\$413.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Aggregate Year-to-Date > \$ 413.00		
SUBTOTAL of Receipts This Page (optional).....			\$2,775.00
TOTAL This Period (last page this line number only).....			

SCHEDULE A

ITEMIZED RECEIPTS

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

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FOR LINE NUMBER
11.a.i.

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NAME OF COMMITTEE (in Full)
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and Zip Code JAMES O OLSON 466 6TH ST NE REYNOLDS ND 58275	Name of Employer FARMER Occupation SELF EMPLOYED	Date(month, day, year) 4/7/98	Amount of Each Receipt this Period \$175.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date>\$ 275.00			
B. Full Name, Mailing Address and Zip Code ROGER L RIVARD PO BOX 376 ARGYLE MN 56713	Name of Employer FARMER Occupation SELF EMPLOYED	Date(month, day, year) 4/7/98	Amount of Each Receipt this Period \$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date>\$ 300.00			
C. Full Name, Mailing Address and Zip Code ROYAL A RIVARD RR 1 BOX 170 ARGYLE MN 56713	Name of Employer FARMER Occupation SELF EMPLOYED	Date(month, day, year) 4/7/98	Amount of Each Receipt this Period \$300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date>\$ 300.00			
D. Full Name, Mailing Address and Zip Code JOEL G ROSS RR 1 BOX 31 FISHER MN 56723	Name of Employer FARMER Occupation SELF EMPLOYED	Date(month, day, year) 4/13/98	Amount of Each Receipt this Period \$475.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date>\$ 475.00			
E. Full Name, Mailing Address and Zip Code KEVIN L ROSS RR 1 BOX 31 FISHER MN 56723	Name of Employer FARMER Occupation SELF EMPLOYED	Date(month, day, year) 4/13/98	Amount of Each Receipt this Period \$200.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date>\$ 473.54			
F. Full Name, Mailing Address and Zip Code KELLY SKAURUD RR 1 BOX 93 GARY MN 56545	Name of Employer FARMER Occupation SELF EMPLOYED	Date(month, day, year) 4/13/98	Amount of Each Receipt this Period \$1,300.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date>\$ 1,300.00			
G. Full Name, Mailing Address and Zip Code G TERRY STADSTAD RR 2 BOX 961 GRAND FORKS ND 58201	Name of Employer FARMER Occupation SELF EMPLOYED	Date(month, day, year) 4/7/98	Amount of Each Receipt this Period \$512.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):			
Aggregate Year-to-Date>\$ 812.00			
SUBTOTAL of Receipts This Page (optional).....			\$3,362.00
TOTAL This Period (last page this line number only).....			

SCHEDULE A

ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)			
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE			
A. Full Name, Mailing Address and Zip Code JERRY TRONNES PO BOX 223 CLIMAX MN 56523	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	FARMER	4/7/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation SELF EMPLOYED	\$620.00
		Aggregate Year-to-Date>\$ 620.00	
B. Full Name, Mailing Address and Zip Code STEVE WILLIAMS PO BOX 208 FISHER MN 56723	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	FARMER	4/7/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation SELF EMPLOYED	\$620.00
		Aggregate Year-to-Date>\$ 620.00	
C. Full Name, Mailing Address and Zip Code TIMOTHY WILWAND PO BOX 150 PEMBINA ND 56271	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	FARMER	4/13/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation SELF EMPLOYED	\$492.00
		Aggregate Year-to-Date>\$ 1,482.00	
D. Full Name, Mailing Address and Zip Code DENNIS WINGE PO BOX 206 DONALDSON MN 56720	Name of Employer	Date(month, day, year)	Amount of Each Receipt this Period
	FARMER	4/7/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):		Occupation SELF EMPLOYED	\$385.00
		Aggregate Year-to-Date>\$ 385.00	
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).....			\$2,117.00
TOTAL This Period (last page this line number only).....			\$11,126.00

SCHEDULE B ITEMIZED DISBURSEMENTS

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

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NAME OF COMMITTEE (in Full)
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
WATKINS FOR CONGRESS PO BOX WW STILLWATER OH 74076 WES WATKINS, R-OK		4/3/98	\$1,000
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CONGRESSWOMAN JULIA CARSON 1 NORTH CAPITOL AVE #211 INDIANAPOLIS IN 46204 D-IN		4/3/98	\$500
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PEASE FOR CONGRESS PO BOX 16021 ALEXANDRIA VA 22302 ED PEASE, R-IN		4/3/98	\$500
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
TEXANS FOR HENRY BONILLA 4451 BROOKFIELD CORP DR #200 CHANTILLY VA 20151 R-TX		4/3/98	\$500
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BONIOR FOR CONGRESS 237 SOUTH GRATIOT MT CLEMENS MI 48043 DAVID BONIOR, D-MI		4/3/98	\$1,000
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
BOUCHER FOR CONGRESS PO BOX 2000 ABINGDON VA 24210 RICK BOUCHER, D-VA		4/3/98	\$500
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CONGRESSMAN SONNY CALLAHAN 2020 PENNSYLVANIA AVE NW #281 WASHINGTON DC 20008 R-AL		4/3/98	\$500
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CHAMBLISS FOR CONGRESS PO BOX 4084 MACON GA 31208 SAXBY CHAMBLISS, R-GA		4/3/98	\$500
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CUBIN FOR CONGRESS PO BOX 4657 CASPER WY 82604 BARBARA CUBIN, R-WY		4/3/98	\$500
Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other			
SUBTOTAL of Disbursements This Page (optional)			\$5,500
TOTAL This Period (last page this line number only)			

SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
PETE KING FOR CONGRESS COMMITTEE PO BOX 1428 SEAFORD NY 11783 R-NY	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	4/3/98	\$500
B. Full Name, Mailing Address and Zip Code FRIENDS FO RON PACKARD 1212 N VERNON ST ARLINGTON VA 22201 R-CA	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	4/3/98	\$1,000
C. Full Name, Mailing Address and Zip Code PETE SESSIONS FOR CONGRESS PO BOX 14097D DALLAS TX 75214 R-TX	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
D. Full Name, Mailing Address and Zip Code BOB ETHERIDGE PO BOX 27846 RALEIGH NC 27611 D-NC	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
E. Full Name, Mailing Address and Zip Code TED STRICKLAND FOR CONGRESS PO BOX 580 LUCASVILLE OH 45648 D-OH	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
F. Full Name, Mailing Address and Zip Code EARL HILLIARD FOR CONGRESS PO BOX 11705 BIRMINGHAM AL 35202 D-AL	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
G. Full Name, Mailing Address and Zip Code ACKERMAN FOR CONGRESS 1645 SOUTH BARTON ST ARLINGTON VA 22204 GARY, D-NY	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
H. Full Name, Mailing Address and Zip Code NATHAN DEAL FOR CONGRESS PO BOX 16021 ALEXANDRIA VA 22302 D-GA	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
I. Full Name, Mailing Address and Zip Code JIM RYUN FOR CONGRESS 1212 N VERNON ST ARLINGTON VA 22201 R-KS	 Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
SUBTOTAL of Disbursements This Page (optional)			\$5,000
TOTAL This Period (last page this line number only)			

SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)			
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE			
A. Full Name, Mailing Address and Zip Code WELLER FOR CONGRESS PO BOX 37 JOLIETT IL 60434 JERRY WELLER, R-IL	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
B. Full Name, Mailing Address and Zip Code A LOT OF PEOPLE SUPPORTING TOM DASCHLE 424 C STREET NE WASHINGTON DC 20002 D-SD	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$2,000
C. Full Name, Mailing Address and Zip Code FRIENDS OF SCOTT MCINNIS 1212 N VERNON STREET ARLINGTON VA 22201 R-GO	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
D. Full Name, Mailing Address and Zip Code HOOSIERS FOR TIM ROEMER 998 NORTH ROYAL STREET ALEXANDRIA VA 22314 D-IN	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
E. Full Name, Mailing Address and Zip Code CITIZENS FOR BEN GILMAN 4451 BROOKFIELD CORP DR #200 CHANTILLY VA 20151 R-NY	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
F. Full Name, Mailing Address and Zip Code WYNN FOR CONGRESS PO BOX 5323 CAPITOL HEIGHTS MD 20791 ALBERT WYNN, D-MD	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
G. Full Name, Mailing Address and Zip Code LINDSEY GRAHAM FOR CONGRESS PO BOX 1155 SENECA SC 29679 R-SC	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/7/98	Amount of Each Disbursement This Period \$500
H. Full Name, Mailing Address and Zip Code JENKINS FOR CONGRESS PO BOX 640 ROGREVILLE TN 37857 R-TN	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/7/98	Amount of Each Disbursement This Period \$500
I. Full Name, Mailing Address and Zip Code STUPAK FOR CONGRESS PO BOX 143 MENDOTA MI 48858 D-MI	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/7/98	Amount of Each Disbursement This Period \$500
SUBTOTAL of Disbursements This Page (optional)			\$6,000
TOTAL This Period (see page this line number only)			

SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (in Full)
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
FRIENDS OF BYRON DORGAN PO BOX 871 BISMARCK ND 58502 D-ND	Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other	4/7/98	\$1,000
B. Full Name, Mailing Address and Zip Code EARL POMERY FOR CONGRESS PO BOX 75214 WASHINGTON DC 20013 D-ND	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	4/8/98	\$2,000
C. Full Name, Mailing Address and Zip Code KARL LANGSETH 2739 163RD AVE SE ARGUSVILLE ND 58005	Purpose of Disbursement Refund - duplicate payment Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/14/98	\$115
D. Full Name, Mailing Address and Zip Code DIAZ-BALART FOR CONGRESS COMMITTEE 431 CANYON HOUSE OFFICE BLDG WASHINGTON DC 20515 LINCOLN DIAZ-BALART, R-FL	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
E. Full Name, Mailing Address and Zip Code HERGER FOR CONGRESS COMMITTEE PO BOX 40175 WASHINGTON DC 20016 WALLY HERGER, R-CA	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$1,000
F. Full Name, Mailing Address and Zip Code BILL THOMAS CAMPAIGN COMMITTEE PO BOX 395 BAKERSFIELD CA 93302 R-CA	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$1,000
G. Full Name, Mailing Address and Zip Code SENATOR PAUL D COVERDELL 3091 MAPLE DRIVE #200 ATLANTA GA 30305 R-GA	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$1,000
H. Full Name, Mailing Address and Zip Code EDDIE BERNICE JOHNSON FOR CONGRESS PO BOX 2884 WASHINGTON DC 20013 D-TX	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$500
I. Full Name, Mailing Address and Zip Code FRIENDS OF JIM OBERSTAR PO BOX 2884 WASHINGTON DC 20013 D-MN	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/3/98	\$1,000
SUBTOTAL of Disbursements This Page (optional).....			\$8,115
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

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FOR LINE NUMBER
23

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NAME OF COMMITTEE (In Full) AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE			
A. Full Name, Mailing Address and Zip Code VIC SNYDER FOR CONGRESS COMMITTEE 130 S CAPITOL WASHINGTON DC 20003 D-AR	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
B. Full Name, Mailing Address and Zip Code KEN CALVERT FOR CONGRESS 4451 BROOKFIELD CORP DR #200 CHANTILLY VA 20151 R-CA	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
C. Full Name, Mailing Address and Zip Code THE JEFFERSON COMMITTEE PO BOX 77137 WASHINGTON DC 20013 WILLIAM JEFFERSON, D-LA	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$1,000
D. Full Name, Mailing Address and Zip Code CITIZENS FOR RON KLINK PO BOX 75214 WASHINGTON DC 20013 D-PA	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
E. Full Name, Mailing Address and Zip Code MIKE MCINTYRE FOR CONGRESS PO BOX 1 LUMBERTON NC 28359 D-NC	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/3/98	Amount of Each Disbursement This Period \$500
F. Full Name, Mailing Address and Zip Code JOE E SERRANO 421 NEW JERSEY AVE SE WASHINGTON DC 20003 D-NY	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/7/98	Amount of Each Disbursement This Period \$500
G. Full Name, Mailing Address and Zip Code KEITH H BROHAUGH RR 1 BOX 81 SHELLY MN 58560	Purpose of Disbursement Grower Refund - does not want to contribute Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/20/98	Amount of Each Disbursement This Period \$386.54
H. Full Name, Mailing Address and Zip Code CONNIT FOR CONGRESS 44 CANAL CENTER PLAZA #400 ALEXANDRIA VA 22314 GARY CONNIT, D-CA	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/20/98	Amount of Each Disbursement This Period \$500
I. Full Name, Mailing Address and Zip Code FRIENDS OF CLIFF STEARNS 4451 BROOKFIELD CORP DR #200 CHANTILLY VA 20151 R-FL	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date(month, day, year) 4/20/98	Amount of Each Disbursement This Period \$500
SUBTOTAL of Disbursements This Page (optional)			\$4,886.54
TOTAL This Period (last page this line number only)			

SCHEDULE B ITEMIZED DISBURSEMENTS

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NAME OF COMMITTEE (In Full)
AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
HYDE FOR CONGRESS COMMITTEE PO BOX 332 DES PLAINES IL 60018 HENRY HYDE, R-IL		4/20/98	\$1,000
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other		
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
CAROLYN CHEEKS KILPATRICK FOR CONGRESS PO BOX 15728 WASHINGTON DC 20003 D-MI		4/20/98	\$500
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other		
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
MURTHA FOR CONGRESS COMMITTEE BOX 1091 JOHNSTOWN PA 15907 JOHN MURTHA, D-PA		4/20/98	\$1,000
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
DAVID PRICE FOR CONGRESS PO BOX 1888 RALEIGH NC 27602 D-NC		4/20/98	\$500
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
HASTER FOR CONGRESS COMMITTEE 8344 CAVALIER CORRIDOR FALLS CHURCH VA 22044 DENNIS HASTER, R-IL		4/20/98	\$500
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
CHARLES TAYLOR FOR CONGRESS COMMITTEE '98 PRIMARY PO BOX 2355 ASHVILLE NC 28901 R-NC		4/20/98	\$500
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
ED TOWNS FOR CONGRESS 442 NEW JERSEY AVE NE #250 WASHINGTON DC 20003 D-NY		4/20/98	\$500
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date(month, day, year)	Amount of Each Disbursement This Period
BILL REDMOND FOR CONGRESS PO BOX 5747 SANTA FE NM 87502 R-NM		4/20/98	\$500
	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
BEN NIGHTHORSE CAMPBELL FOR SENATE PO BOX 480166 DENVER CO 80248 R-CO		4/20/98	\$1,000
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
SUBTOTAL of Disbursements This Page (optional)			\$6,000
TOTAL This Period (last page this line number only)			

SCHEDULE B ITEMIZED DISBURSEMENTS


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NAME OF COMMITTEE (in Full) AMERICAN CRYSTAL SUGAR POLITICAL ACTION COMMITTEE			
A. Full Name, Mailing Address and Zip Code JAY JOHNSON FOR CONGRESS PO BOX 75214 WASHINGTON DC 20013 D-WI	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	Date(month, day, year) 4/28/98	Amount of Each Disbursement This Period \$500
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other	Date(month, day, year)	Amount of Each Disbursement This Period
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)			\$500
TOTAL This Period (last page this line number only)			\$36,001.54

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 5/20/98
<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	
	5/26/98
PREPARER	DATE PREPARED