

# 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. 12FE4M5

**Farm Credit Council Political Action Committee**

ADDRESS (number and street) 50 F Street NW

Check if different than previously reported. (ACC) Suite 900

Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** ▼ C C00193631 **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 10 / 21 / 2014 in the State of DC

(d) 30-Day **POST-Election** Report for the:

General (30G)  Runoff (30R)  Special (30S)

Election on  /  /  in the State of

5. Covering Period 10 / 01 / 2014 through 10 / 15 / 2014

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 William Jeffrey Shipp

Signature of Treasurer William Jeffrey Shipp *[Electronically Filed]* Date 10 / 21 / 2014

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

**Farm Credit Council Political Action Committee**

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="2014"/>		714308.15
(b) Cash on Hand at Beginning of Reporting Period.....	662038.88	
(c) Total Receipts (from Line 19) .....	7037.71	512360.31
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	669076.59	1226668.46
7. Total Disbursements (from Line 31).....	15080.50	572672.37
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	653996.09	653996.09
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	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

**Farm Credit Council Political Action Committee**

Report Covering the Period: From:  /  /  To:  /  /

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).....	4950.00	401117.00
(ii) Unitemized .....	2085.00	104138.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7035.00	505255.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	7035.00	505255.00
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	6500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2.71	605.31
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))..... ▶	7037.71	512360.31
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7037.71	512360.31

**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 .....	80.50	9810.05
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	80.50	9810.05
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15000.00	558702.32
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	3635.00
(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	3635.00
29. Other Disbursements .....	0.00	525.00
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)) ..	15080.50	572672.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	15080.50	572672.37

**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) .....	7035.00	505255.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	3635.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	7035.00	501620.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	80.50	9810.05
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	80.50	9810.05

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 21  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Blair J Wilson**  
 Mailing Address 2001 E. Goodman Court  
 City State Zip Code  
 Boise ID 83712-8400  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Northwest Farm Credit Services, ACA, P SVP  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2014  
**Transaction ID : 37553343**  
 Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**B. Ms. Heidi Borlaug**  
 Mailing Address Box 167  
 City State Zip Code  
 Gildford MT 59525-0167  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Northwest Farm Credit Services, ACA, P Operations Manager  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2014  
**Transaction ID : 37564676**  
 Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**C. Mr. Dean Benson**  
 Mailing Address PO Box 728  
 City State Zip Code  
 Prosser WA 99350-0728  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Northwest Farm Credit Services, ACA, P SVP Insurance Services  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : 37565511**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 21
	<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)  
**Farm Credit Council Political Action Committee**

**A. Mr. Brian K. Monckton**  
Full Name (Last, First, Middle Initial)

Mailing Address 4865 Barrville Road

City Elba State NY Zip Code 14058-9522

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

Name of Employer Farm Credit East Occupation Regional EVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2014

**Transaction ID : 37568067**

Amount of Each Receipt this Period  
 250.00

**B. Mr. Benjamin D. Potter**  
Full Name (Last, First, Middle Initial)

Mailing Address 250 Keel Road

City Grantsboro State NC Zip Code 28529-9424

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

Name of Employer AgCarolina Farm Credit ACA, FLCA Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : 37568626**

Amount of Each Receipt this Period  
 500.00

**C. Mr. Douglas D. Scott**  
Full Name (Last, First, Middle Initial)

Mailing Address 4736 Milligantown Rd.

City Hurlock State MD Zip Code 21643-3800

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

Name of Employer MidAtlantic Farm Credit ACA, FLCA Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014

**Transaction ID : 37568630**

Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 8 OF 21
	<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)  
**Farm Credit Council Political Action Committee**

**A. Mr. Jeffrey A. Moser**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 262 - 11th Avenue  
 City State Zip Code  
 Meyersdale PA 15552-6912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AgChoice Farm Credit, ACA, FLCA Loan Officer  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : 37568631**  
 Amount of Each Receipt this Period  
 400.00

**B. Ms. Jenny R. Black**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1860 Pinnacle Drive  
 City State Zip Code  
 Lakeland FL 33813-3058  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Farm Credit of Central Florida, ACA, F Director  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2014  
**Transaction ID : 37568632**  
 Amount of Each Receipt this Period  
 500.00

**C. Mr. John R. Gates**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2649 Burlington Avenue  
 City State Zip Code  
 Billings MT 59102-3826  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Northwest Farm Credit Services, ACA, P Regional Vice President  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2014  
**Transaction ID : 37568651**  
 Amount of Each Receipt this Period  
 250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1150.00
<b>TOTAL</b> 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 21
	<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)  
**Farm Credit Council Political Action Committee**

**A. Mr. Rod Endow**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5913 N. Cosworth Place  
City Boise State ID Zip Code 83713-1264  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Northwest Farm Credit Services, ACA, P Occupation Branch Manager/VP  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 300.00

Date of Receipt 10 / 07 / 2014  
**Transaction ID : 37577732**  
Amount of Each Receipt this Period 300.00

**B. Ms. Mandy Minick**  
Full Name (Last, First, Middle Initial)  
Mailing Address c/o Northwest FCS P.O. Box 2515  
City Spokane State WA Zip Code 99220-2515  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Northwest Farm Credit Services, ACA, P Occupation Senior Vice President-AgriBusiness  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 500.00

Date of Receipt 10 / 08 / 2014  
**Transaction ID : 37577749**  
Amount of Each Receipt this Period 500.00

**C. Pat Creagh**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6128 N. Alberta Street  
City Spokane State WA Zip Code 99205-7107  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Northwest Farm Credit Services, ACA, P Occupation Appraiser  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 10 / 14 / 2014  
**Transaction ID : 37602361**  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional)..... **1050.00**  
**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: PAGE 10 OF 21  
(check only one)

<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)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. Mr. Alton Bain**

Mailing Address 439 Keith Hills Road

City Lillington State NC Zip Code 27546-9770

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

Name of Employer Cape Fear Farm Credit Occupation Director

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
10 / 14 / 2014  
**Transaction ID : 37605536**

Amount of Each Receipt this Period  
250.00

Full Name (Last, First, Middle Initial)  
**B. Mr. Mark C. Nonnenmacher**

Mailing Address 4307 S. Craftsman Court

City Spokane State WA Zip Code 99223-4431

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

Name of Employer Northwest Farm Credit Services, ACA, P Occupation Executive VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
10 / 10 / 2014  
**Transaction ID : 37605560**

Amount of Each Receipt this Period  
500.00

Full Name (Last, First, Middle Initial)  
**C.**

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	4950.00

**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 21
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial) <b>A. SunTrust Bank- Checking</b>		Date of Receipt
Mailing Address 1445 New York Avenue, NW		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 37612247</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="0.18"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="605.31"/>		

Full Name (Last, First, Middle Initial) <b>B. SunTrust Bank- Checking</b>		Date of Receipt
Mailing Address 1445 New York Avenue, NW		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 37612250</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="0.72"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="605.13"/>		

Full Name (Last, First, Middle Initial) <b>C. SunTrust Bank- Checking</b>		Date of Receipt
Mailing Address 1445 New York Avenue, NW		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City Washington	State DC	Zip Code 20005
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : 37612262</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="0.18"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="604.41"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1.08"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>



**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 21
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)  
**A. SunTrust Bank- Checking**

Mailing Address 1445 New York Avenue, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **603.69**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2014

**Transaction ID : 37612267**

Amount of Each Receipt this Period  

0.55
------

Full Name (Last, First, Middle Initial)  
**B. SunTrust Bank- Checking**

Mailing Address 1445 New York Avenue, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **603.14**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2014

**Transaction ID : 37612270**

Amount of Each Receipt this Period  

0.18
------

Full Name (Last, First, Middle Initial)  
**C. SunTrust Bank- Checking**

Mailing Address 1445 New York Avenue, NW

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **602.96**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	02	/	2014

**Transaction ID : 37612271**

Amount of Each Receipt this Period  

0.18
------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>0.91</b>
<b>TOTAL</b> 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: PAGE 14 OF 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

**A. SunTrust Bank- Checking**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1445 New York Avenue, NW  
 City Washington State DC Zip Code 20005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 602.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2014  
**Transaction ID : 37612274**  
 Amount of Each Receipt this Period  
 0.18

**B.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	0.18
<b>TOTAL</b> This Period (last page this line number only).....▶	2.71

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 37602630**

Amount of Each Disbursement this Period

Transaction Fee

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 37612454**

Amount of Each Disbursement this Period

Transaction Fee

Full Name (Last, First, Middle Initial)

**C. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

**Transaction ID : 37612466**

Amount of Each Disbursement this Period

Transaction Fee

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

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

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 06 / 2014

**Transaction ID : 37612467**

Amount of Each Disbursement this Period

3.50

Transaction Fee

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 07 / 2014

**Transaction ID : 37612468**

Amount of Each Disbursement this Period

7.55

Transaction Fee

Full Name (Last, First, Middle Initial)

**C. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 08 / 2014

**Transaction ID : 37612469**

Amount of Each Disbursement this Period

10.75

Transaction Fee

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

21.80

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



**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 09 / 2014

**Transaction ID : 37612470**

Amount of Each Disbursement this Period

8.75

Transaction Fee

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 10 / 2014

**Transaction ID : 37612473**

Amount of Each Disbursement this Period

14.80

Transaction Fee

Full Name (Last, First, Middle Initial)

**C. PayPal**

Mailing Address 2211 North First Street

City San Jose State CA Zip Code 95131

Purpose of Disbursement  
Transaction Fee

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 14 / 2014

**Transaction ID : 37612474**

Amount of Each Disbursement this Period

3.20

Transaction Fee

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

26.75

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

80.50

**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

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Blaine For Congress, Inc.**

Mailing Address P.O. Box 25

City State Zip Code  
Holts Summit MO 65043-0025

Purpose of Disbursement  
Void - Blaine For Congress, Inc.

Candidate Name  
**Rep. Blaine Luetkemeyer**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: MO District: 03

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : 37546798**

Amount of Each Disbursement this Period

-500.00

Void - Blaine For Congress, Inc.

Full Name (Last, First, Middle Initial)

**B. Shaheen for Senate**

Mailing Address 300 Bedford Street, Suite 131

City State Zip Code  
Manchester NH 03101

Purpose of Disbursement  
Jean Shaheen (D-NH)

Candidate Name  
**Sen. Jeanne Shaheen**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: NH District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2014

**Transaction ID : 37546807**

Amount of Each Disbursement this Period

2000.00

Jean Shaheen (D-NH)

Full Name (Last, First, Middle Initial)

**C. David Scott For Congress**

Mailing Address P.O. Box 960821

City State Zip Code  
Riverdale GA 30296

Purpose of Disbursement  
David Scott (D-GA-13)

Candidate Name  
**Rep. David A. Scott**

Office Sought:  House  Senate  President  
Disbursement For: 2014  Primary  General  Other (specify) ▼  
State: GA District: 13

Date of Disbursement

MM / DD / YYYY  
10 / 03 / 2014

**Transaction ID : 37563956**

Amount of Each Disbursement this Period

2500.00

David Scott (D-GA-13)

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

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

4000.00

**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

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Buck For Colorado**

Mailing Address P.O. Box 338108

City State Zip Code  
Greeley CO 80633

Purpose of Disbursement  
Ken Buck (R-CO-4)

011

Candidate Name

**Mr. Kenneth Buck**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CO District: 04

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	3		2	0	1	4

**Transaction ID : 37564022**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Ken Buck (R-CO-4)

Full Name (Last, First, Middle Initial)

**B. Greater Tomorrow PAC**

Mailing Address 600 Pennsylvania Avenue SE  
Suite 330

City State Zip Code  
Washington DC 20003

Purpose of Disbursement

011

Candidate Name

**Greater Tomorrow PAC**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	8		2	0	1	4

**Transaction ID : 37577613**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. Friends Of Bennie Thompson**

Mailing Address P.O. Box 100

City State Zip Code  
Bolton MS 39041

Purpose of Disbursement  
Bennie Thompson (D-MS-2)

011

Candidate Name

**Rep. Bennie G. Thompson**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: MS District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	4

**Transaction ID : 37582280**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Bennie Thompson (D-MS-2)

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

7	5	0	0	.	0	0
---	---	---	---	---	---	---

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

7	5	0	0	.	0	0
---	---	---	---	---	---	---

**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

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NAME OF COMMITTEE (In Full)  
**Farm Credit Council Political Action Committee**

Full Name (Last, First, Middle Initial)

**A. Chris Coons For Delaware**

Mailing Address P.O. Box 9900

City Newark State DE Zip Code 19714

Purpose of Disbursement  
Chris Coons (D-DE)

011

Candidate Name  
**Sen. Christopher Coons**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: DE District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			10			2014			

Transaction ID : 37585456

Amount of Each Disbursement this Period

2500.00
---------

Chris Coons (D-DE)

Full Name (Last, First, Middle Initial)

**B. Crawford For Congress**

Mailing Address P.O. Box 16956

City Jonesboro State AR Zip Code 72403

Purpose of Disbursement  
Void - Crawford For Congress

011

Candidate Name  
**Rep. Rick Crawford**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AR District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2014			

Transaction ID : 37597968

Amount of Each Disbursement this Period

-1000.00
----------

Void - Crawford For Congress

Full Name (Last, First, Middle Initial)

**C. Crawford For Congress**

Mailing Address P.O. Box 16956

City Jonesboro State AR Zip Code 72403

Purpose of Disbursement  
Void - Crawford For Congress

011

Candidate Name  
**Rep. Rick Crawford**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: AR District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2014			

Transaction ID : 37597970

Amount of Each Disbursement this Period

-2000.00
----------

Void - Crawford For Congress

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

-500.00
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**TOTAL** This Period (last page this line number only)..... ▶

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