

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

MINN-DAK SUGAR PAC (MDSPAC)

ADDRESS (number and street) 7525 RED RIVER ROAD

Check if different than previously reported. (ACC) WAHPETON ND 58075

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00164939

3. IS THIS REPORT [X] 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 Quarterly Report(YE)
[X] 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 (12G)

Election on in the State of

(d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 01 01 2011 through 06 30 2011

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 STEVEN CASPERS

Signature of Treasurer Electronically Filed by STEVEN CASPERS Date 07 27 2011

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

Table with 8 columns and 1 row for Office Use Only.

FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
MINN-DAK SUGAR PAC (MDSPAC)

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		240663.21
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	240663.21									
(c) Total Receipts (from Line 19) .....	27197.89	27197.89								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	267861.10	267861.10								
7. Total Disbursements (from Line 31) .....	114688.00	114688.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	153173.10	153173.10								
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**

Write or Type Committee Name  
MINN-DAK SUGAR PAC (MDSPAC)

Report Covering the Period: From: 

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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) .....	20045.07	20045.07
(ii) Unitemized .....	5936.73	5936.73
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	25981.80	25981.80
(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) .....	25981.80	25981.80
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 .....	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	216.09	216.09
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 Transfer (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)) .....	27197.89	27197.89
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	27197.89	27197.89

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	188.00	188.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	188.00	188.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	114500.00	114500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	114688.00	114688.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	114688.00	114688.00

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) .....	25981.80	25981.80
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25981.80	25981.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	188.00	188.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	188.00	188.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 57

(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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.**

Full Name (Last, First, Middle Initial)  
BRADLEY ANDERSON

Mailing Address 2248 361ST ST

City State Zip Code  
BRECKENRIDGE MN 56520-9454

FEC ID number of contributing federal political committee. C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1243.20

Date of Receipt  
01 / 01 / 2011

**Transaction ID:** SA11AI.16510

Amount of Each Receipt this Period  
1243.20

**B.**

Full Name (Last, First, Middle Initial)  
JAMES BAKER

Mailing Address 9061 70TH AVE S

City State Zip Code  
SABIN MN 56580-9512

FEC ID number of contributing federal political committee. C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
578.40

Date of Receipt  
01 / 01 / 2011

**Transaction ID:** SA11AI.16499

Amount of Each Receipt this Period  
578.40

**C.**

Full Name (Last, First, Middle Initial)  
JAMES BAKER

Mailing Address 9061 70TH AVE S

City State Zip Code  
SABIN MN 56580-9512

FEC ID number of contributing federal political committee. C

Name of Employer  
SELF-EMPLOYED

Occupation  
FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
685.07

Date of Receipt  
01 / 01 / 2011

**Transaction ID:** SA11AI.16539

Amount of Each Receipt this Period  
106.67

**SUBTOTAL** of Receipts This Page (optional) ..... 1928.27

**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 / 57
	<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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.** Full Name (Last, First, Middle Initial)  
ANDREW BEYER

Mailing Address 2665 170TH AVE

City KENT State MN Zip Code 56553

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 01 / 02 / 2011

Transaction ID: SA11AI.16508

Amount of Each Receipt this Period 400.00

**B.** Full Name (Last, First, Middle Initial)  
ANDREW BEYER

Mailing Address 2665 170TH AVE

City KENT State MN Zip Code 56553

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 560.00

Date of Receipt 01 / 02 / 2011

Transaction ID: SA11AI.16519

Amount of Each Receipt this Period 160.00

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

Mailing Address 16870 77 ST SE

City MOORETON State ND Zip Code 58061

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 468.80

Date of Receipt 01 / 01 / 2011

Transaction ID: SA11AI.16513

Amount of Each Receipt this Period 468.80

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1028.80

**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 8 / 57  
(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)  
MINN-DAK SUGAR PAC (MDSPAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) DOUGLAS R CHRISTENSEN</p> <p>Mailing Address 2239 450TH ST</p> <hr/> <p>City State Zip Code CAMPBELL MN 56522</p> <hr/> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <hr/> <p>Name of Employer Occupation SELF-EMPLOYED FARMER</p> <hr/> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">720.00</span></p>	<p>Date of Receipt  <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1 / 0 1 / 2 0 1 1</td> </tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.16514</p> <hr/> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">720.00</span></p>	M M / D D / Y Y Y Y	0 1 / 0 1 / 2 0 1 1
M M / D D / Y Y Y Y			
0 1 / 0 1 / 2 0 1 1			

<p><b>B.</b> Full Name (Last, First, Middle Initial) JOHN E DANIELS</p> <p>Mailing Address 2851 STATE HWY 55</p> <hr/> <p>City State Zip Code NASHUA MN 56565-9548</p> <hr/> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <hr/> <p>Name of Employer Occupation SELF-EMPLOYED FARMER</p> <hr/> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">378.40</span></p>	<p>Date of Receipt  <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1 / 0 1 / 2 0 1 1</td> </tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.16515</p> <hr/> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">378.40</span></p>	M M / D D / Y Y Y Y	0 1 / 0 1 / 2 0 1 1
M M / D D / Y Y Y Y			
0 1 / 0 1 / 2 0 1 1			

<p><b>C.</b> Full Name (Last, First, Middle Initial) TERRY DOHMAN</p> <p>Mailing Address 1502 14TH AVE N</p> <hr/> <p>City State Zip Code WAHPETON ND 58075</p> <hr/> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <hr/> <p>Name of Employer Occupation SELF-EMPLOYED FARMER</p> <hr/> <p>Receipt For: Aggregate Year-to-Date ▼  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼ <span style="border: 1px solid black; padding: 2px;">204.80</span></p>	<p>Date of Receipt  <table border="0" style="width: 100%;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">0 1 / 0 1 / 2 0 1 1</td> </tr> </table> </p> <p><b>Transaction ID:</b> SA11AI.16517</p> <hr/> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px; display: block; text-align: right;">204.80</span></p>	M M / D D / Y Y Y Y	0 1 / 0 1 / 2 0 1 1
M M / D D / Y Y Y Y			
0 1 / 0 1 / 2 0 1 1			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1303.20</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>



**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 / 57
	<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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) DAVID FIXEN		Date of Receipt
	Mailing Address 7480 172 AVE SE		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/>
	City	State	Zip Code
	WAHPETON	ND	58075
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16522
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="439.20"/>
		<input type="text" value="439.20"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) DAVID R HAGSTROM		Date of Receipt
	Mailing Address 925 MAIN STREET		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/>
	City	State	Zip Code
	BRECKENRIDGE	MN	56520
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16527
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="268.80"/>
		<input type="text" value="268.80"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) DAVID HASBARGEN		Date of Receipt
	Mailing Address 852 RIVERBEND ROAD		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/>
	City	State	Zip Code
	OXBOW	ND	58047
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16528
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="800.00"/>
		<input type="text" value="800.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1508.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 10 / 57  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL W HASBARGEN

Mailing Address 2553 360TH ST

City State Zip Code  
BRECKENRIDGE MN 56520

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 704.00

Date of Receipt  
MM / DD / YYYY  
01 / 01 / 2011

**Transaction ID:** SA11AI.16529

Amount of Each Receipt this Period  
704.00

**B.** Full Name (Last, First, Middle Initial)  
JOHN HAUGEN

Mailing Address 1028 VALLEY ST

City State Zip Code  
WAHPETON ND 58075

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

Name of Employer MDFC Occupation VP ENGINEERING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
MM / DD / YYYY  
06 / 03 / 2011

**Transaction ID:** SA11AI.16618

Amount of Each Receipt this Period  
20.00

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

Mailing Address 1028 VALLEY ST

City State Zip Code  
WAHPETON ND 58075

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

Name of Employer MDFC Occupation VP ENGINEERING

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
06 / 23 / 2011

**Transaction ID:** SA11AI.16712

Amount of Each Receipt this Period  
20.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **744.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 57
	<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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN HAUGEN		Date of Receipt
	Mailing Address 1028 VALLEY ST		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	WAHPETON	ND	58075
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16649
Name of Employer MDFC		Occupation VP ENGINEERING	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	<input type="text" value="20.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) JAMES KEMPFER		Date of Receipt
	Mailing Address P O BOX 55		<input type="text" value="01"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	FOXHOME	MN	56543
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16536
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 361.60	<input type="text" value="361.60"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT KEMPFER		Date of Receipt
	Mailing Address P O BOX 25		<input type="text" value="01"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	FOXHOME	MN	56543
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16537
Name of Employer SELF-EMPLOYED		Occupation FARMER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 268.80	<input type="text" value="268.80"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="650.40"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 57  
(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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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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.**

Full Name (Last, First, Middle Initial)  
TODD KLEIN

Mailing Address 2460 CO RD 16

City BRECKENRIDGE State MN Zip Code 56520

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 405.74

Date of Receipt: 01 / 02 / 2011  
**Transaction ID:** SA11AI.16574  
 Amount of Each Receipt this Period: 382.40

**B.**

Full Name (Last, First, Middle Initial)  
CAROLYN J KUTZER

Mailing Address 9122 182 AVE SE

City FAIRMOUNT State ND Zip Code 58030

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID:** SA11AI.16548  
 Amount of Each Receipt this Period: 275.00

**C.**

Full Name (Last, First, Middle Initial)  
C KEVIN KUTZER

Mailing Address 9005 182 AVE SE

City FAIRMOUNT State ND Zip Code 58030

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID:** SA11AI.16543  
 Amount of Each Receipt this Period: 395.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1052.40

**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 13 / 57  
(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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.** Full Name (Last, First, Middle Initial)  
DIANE K KUTZER

Mailing Address 9005 182 AVE SE

City FAIRMOUNT State ND Zip Code 58030

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 395.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID: SA11AI.16544**  
 Amount of Each Receipt this Period: 395.00

**B.** Full Name (Last, First, Middle Initial)  
KYLE D KUTZER

Mailing Address 9122 182 AVE SE

City FAIRMOUNT State ND Zip Code 58030

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID: SA11AI.16547**  
 Amount of Each Receipt this Period: 275.00

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

Mailing Address P O BOX 592

City WAHPETON State ND Zip Code 58075

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID: SA11AI.16602**  
 Amount of Each Receipt this Period: 312.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 982.00

**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 14 / 57  
(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

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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.**

Full Name (Last, First, Middle Initial)  
MARK MEYER

Mailing Address 9347 CO RD 81

City FAIRMOUNT State ND Zip Code 58030

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 597.60

Date of Receipt: 01 / 01 / 2011  
**Transaction ID: SA11AI.16556**  
 Amount of Each Receipt this Period: 597.60

**B.**

Full Name (Last, First, Middle Initial)  
MARY E MEYER

Mailing Address P O BOX 592

City WAHPETON State ND Zip Code 58075

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID: SA11AI.16557**  
 Amount of Each Receipt this Period: 312.00

**C.**

Full Name (Last, First, Middle Initial)  
JEANETTE MILLER

Mailing Address 1930 WALNUT COURT

City WAHPETON State ND Zip Code 58075

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 268.80

Date of Receipt: 01 / 01 / 2011  
**Transaction ID: SA11AI.16560**  
 Amount of Each Receipt this Period: 268.80

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1178.40**

**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 15 / 57  
(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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.**

Full Name (Last, First, Middle Initial)  
LARRY C MILLER

Mailing Address 1930 WALNUT COURT

City WAHPETON State ND Zip Code 58075

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 268.80

Date of Receipt: 01 / 01 / 2011  
**Transaction ID: SA11AI.16561**  
 Amount of Each Receipt this Period: 268.80

**B.**

Full Name (Last, First, Middle Initial)  
BRUCE W OLSON

Mailing Address 7145 174 R AVE SE

City WAHPETON State ND Zip Code 58075

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 561.60

Date of Receipt: 01 / 02 / 2011  
**Transaction ID: SA11AI.16566**  
 Amount of Each Receipt this Period: 561.60

**C.**

Full Name (Last, First, Middle Initial)  
JOSEPH SAUTER

Mailing Address 18155 100 ST SE

City FAIRMOUNT State ND Zip Code 58030

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID: SA11AI.16568**  
 Amount of Each Receipt this Period: 320.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1150.40

**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 16 / 57  
(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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.**

Full Name (Last, First, Middle Initial)  
LARRY SCHNEEBERGER

Mailing Address 25651 290TH AVE

City State Zip Code  
WENDELL MN 56590-9714

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.16569

Amount of Each Receipt this Period  
436.00

**B.**

Full Name (Last, First, Middle Initial)  
CHARLES SCHREIBER

Mailing Address 3850 310TH AVE

City State Zip Code  
FOXHOME MN 56543

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 982.40

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.16571

Amount of Each Receipt this Period  
982.40

**C.**

Full Name (Last, First, Middle Initial)  
DARRIN SCHREINER

Mailing Address 4984 167TH AVE SE

City State Zip Code  
KINDRED ND 58051

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 512.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 1 / 0 1 / 2 0 1 1

Transaction ID: SA11AI.16573

Amount of Each Receipt this Period  
512.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1930.40**

**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 17 / 57
	<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	

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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) DUANE THIMJON	Date of Receipt MM / DD / YYYY 01 / 02 / 2011
	Mailing Address 17785 86TH ST SE	<b>Transaction ID:</b> SA11AI.16577
	City WAHPETON State ND Zip Code 58075	Amount of Each Receipt this Period 643.20
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer SELF-EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 643.20	

<b>B.</b>	Full Name (Last, First, Middle Initial) JAY THIMJON	Date of Receipt MM / DD / YYYY 01 / 01 / 2011
	Mailing Address 8451 HWY 127	<b>Transaction ID:</b> SA11AI.16575
	City WAHPETON State ND Zip Code 58075	Amount of Each Receipt this Period 643.20
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer SELF-EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 643.20	

<b>C.</b>	Full Name (Last, First, Middle Initial) TROY THIMJON	Date of Receipt MM / DD / YYYY 01 / 01 / 2011
	Mailing Address 17785 86TH ST SE	<b>Transaction ID:</b> SA11AI.16576
	City WAHPETON State ND Zip Code 58075	Amount of Each Receipt this Period 643.20
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer SELF-EMPLOYED Occupation FARMER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 643.20	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1929.60
<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 18 / 57  
(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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.** Full Name (Last, First, Middle Initial)  
JENNIFER WULFEKUHLE  
Mailing Address 2260 300TH ST

City State Zip Code  
BRECKENRIDGE MN 56520

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 253.60

Date of Receipt  
MM / DD / YYYY  
01 / 01 / 2011  
Transaction ID: SA11AI.16584  
Amount of Each Receipt this Period 253.60

**B.** Full Name (Last, First, Middle Initial)  
JOSEPH C WULFEKUHLE  
Mailing Address 2116 190TH ST

City State Zip Code  
WOLVERTON MN 56594-9574

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 505.60

Date of Receipt  
MM / DD / YYYY  
01 / 01 / 2011  
Transaction ID: SA11AI.16582  
Amount of Each Receipt this Period 505.60

**C.** Full Name (Last, First, Middle Initial)  
TONY WULFEKUHLE  
Mailing Address 2260 300TH ST

City State Zip Code  
BRECKENRIDGE MN 56520

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 253.60

Date of Receipt  
MM / DD / YYYY  
01 / 01 / 2011  
Transaction ID: SA11AI.16583  
Amount of Each Receipt this Period 253.60

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1012.80

**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 19 / 57  
(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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.**

Full Name (Last, First, Middle Initial)  
DONALD YAGGIE

Mailing Address 2642 STATE HWY 210

City BRECKENRIDGE State MN Zip Code 56520

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID:** SA11AI.16518  
 Amount of Each Receipt this Period: 320.00

**B.**

Full Name (Last, First, Middle Initial)  
DONALD YAGGIE

Mailing Address 2642 STATE HWY 210

City BRECKENRIDGE State MN Zip Code 56520

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 01 / 01 / 2011  
**Transaction ID:** SA11AI.16585  
 Amount of Each Receipt this Period: 80.00

**C.**

Full Name (Last, First, Middle Initial)  
JEFFREY YAGGIE

Mailing Address 2642 STATE HWY 210

City BRECKENRIDGE State MN Zip Code 56520

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 617.60

Date of Receipt: 01 / 01 / 2011  
**Transaction ID:** SA11AI.16586  
 Amount of Each Receipt this Period: 617.60

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1017.60

**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 20 / 57
	(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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.**

Full Name (Last, First, Middle Initial)  
MICHAEL YAGGIE

Mailing Address 1544 OAKWOOD AVE

City WAHPETON State ND Zip Code 58075

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 646.40

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 0 1 / 2 0 1 1

**Transaction ID:** SA11AI.16587

Amount of Each Receipt this Period  
646.40

**B.**

Full Name (Last, First, Middle Initial)  
RICHARD YAGGIE

Mailing Address 2338 STATE HWY 210

City BRECKENRIDGE State MN Zip Code 56520-9665

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

Name of Employer SELF-EMPLOYED Occupation FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1982.40

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 1 / 0 1 / 2 0 1 1

**Transaction ID:** SA11AI.16567

Amount of Each Receipt this Period  
1982.40

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	2628.80
<b>TOTAL</b> This Period (last page this line number only) .....	▶	20045.07

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 21 / 57  
(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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.** Full Name (Last, First, Middle Initial)  
DAVID DANIEL BOREN

Mailing Address PO BOX 1924

City State Zip Code  
MUSKOGEE OK 74402

FEC ID number of contributing federal political committee. **C** H4OK02089

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
06 / 30 / 2011

Transaction ID: SA16.16707

Amount of Each Receipt this Period  
1000.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 22 / 57	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) WELLS FARGO BANK		Date of Receipt
	Mailing Address 406 MAIN AVENUE		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	FARGO	ND	58126
	FEC ID number of contributing federal political committee.		Transaction ID: SA17.16719
	<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text" value="30.13"/>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		INTEREST INCOME	
Aggregate Year-to-Date ▼		<input type="text" value="216.09"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="30.13"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="30.13"/>

# 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.

Full Name (Last, First, Middle Initial)  
GARY L. ACKERMAN

Transaction ID: SB23.12342  
Date of Disbursement

Mailing Address 113 Deer Run

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	9		2	0	1	1

City Roslyn Heights State NY Zip Code 11577

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
GARY L. ACKERMAN

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NY District: 05

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
RODNEY MR. ALEXANDER

Transaction ID: SB23.12548  
Date of Disbursement

Mailing Address PO Box 367

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	7		2	0	1	1

City QUITMAN State LA Zip Code 71268

Amount of Each Disbursement this Period

Purpose of Disbursement

1000.00
---------

Candidate Name  
RODNEY MR. ALEXANDER

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: LA District: 05

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
AMERICAN SUGARBEET GROWERS ASSOCIATION POLITICAL ACTION COMMITTEE

Transaction ID: SB23.16332  
Date of Disbursement

Mailing Address 1156 15TH ST NW SUITE 1101

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

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

Purpose of Disbursement

5000.00
---------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

7000.00
---------

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

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**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)

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<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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) RICHARD A BERG <hr/> Mailing Address PO BOX 9394 <hr/> City FARGO State ND Zip Code 58106 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name RICHARD A BERG Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ND District: 00	Transaction ID: SB23.12533 Date of Disbursement 06 / 17 / 2011
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Rep. ROY BLUNT <hr/> Mailing Address PO Box 50100 <hr/> City Springfield State MO Zip Code 65805 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. ROY BLUNT Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 07	Transaction ID: SB23.12517 Date of Disbursement 06 / 02 / 2011
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) JO BONNER <hr/> Mailing Address 143 Myrtlewood Lane <hr/> City Mobile State AL Zip Code 36608 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name JO BONNER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AL District: 01	Transaction ID: SB23.12546 Date of Disbursement 06 / 17 / 2011
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>



# 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) DAVID DANIEL BOREN <hr/> Mailing Address PO BOX 1924 <hr/> City MUSKOGEE State OK Zip Code 74402 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name DAVID DANIEL BOREN Category/Type <input type="text"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OK District: 02	Transaction ID: SB23.12335 Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2011	
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>	
	Full Name (Last, First, Middle Initial) Rep. LEONARD L. BOSWELL <hr/> Mailing Address 4323 Grand Ave. <hr/> City Des Moines State IA Zip Code 50312 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. LEONARD L. BOSWELL Category/Type <input type="text"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IA District: 03	Transaction ID: SB23.12547 Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2011
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>	
<b>C.</b> Full Name (Last, First, Middle Initial) CHARLES DR. JR. BOUSTANY <hr/> Mailing Address PO Box 80125 <hr/> City Lafayette State LA Zip Code 70598 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name CHARLES DR. JR. BOUSTANY Category/Type <input type="text"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: LA District: 07	Transaction ID: SB23.12319 Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2011	
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

# 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) MO BROOKS</p> <p>Mailing Address 7610 FOXFIRE DR.</p> <p>City HUNTSVILLE State AL Zip Code 35802</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name MO BROOKS Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 05</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12590</p> <p>Date of Disbursement 06 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) VERNON BUCHANAN</p> <p>Mailing Address P. O. BOX 48928</p> <p>City SARASOTA State FL Zip Code 34230</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name VERNON BUCHANAN Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 13</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12306</p> <p>Date of Disbursement 04 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Rep. DAVID LEE CAMP</p> <p>Mailing Address 5905 Wimbledon Ct.</p> <p>City Midland State MI Zip Code 48642</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name Rep. DAVID LEE CAMP Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12562</p> <p>Date of Disbursement 06 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

3000.00

**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)

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<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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) <b>BEN CHANDLER</b>	<b>Transaction ID:</b> SB23.12516
	Mailing Address 975 PISGAH PIKE	Date of Disbursement MM / DD / YYYY 05 / 24 / 2011
	City VERSAILLES State KY Zip Code 40383	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name <b>BEN CHANDLER</b>	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 06	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>JAMES E CLYBURN</b>	<b>Transaction ID:</b> SB23.12565
	Mailing Address 501 Juniper Street	Date of Disbursement MM / DD / YYYY 06 / 28 / 2011
	City Columbia State SC Zip Code 29203	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name <b>JAMES E CLYBURN</b>	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>Rep. JOHN HOWARD COBLE</b>	<b>Transaction ID:</b> SB23.12255
	Mailing Address 5741-L BRAMBLEGATE	Date of Disbursement MM / DD / YYYY 03 / 01 / 2011
	City GREENSBORO State NC Zip Code 27409	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name <b>Rep. JOHN HOWARD COBLE</b>	Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> 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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) <b>MIKE COFFMAN</b>	<b>Transaction ID:</b> SB23.12574
	Mailing Address 9249 SOUTH BROADWAY #200-501	Date of Disbursement 06 / 28 / 2011
	City HIGHLANDS RANCH State CO Zip Code 80129	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name MIKE COFFMAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: CO District: 06	
B.	Full Name (Last, First, Middle Initial) <b>K MICHAEL CONAWAY</b>	<b>Transaction ID:</b> SB23.12293
	Mailing Address 4100 Cardinal Lane	Date of Disbursement 04 / 08 / 2011
	City MIDLAND State TX Zip Code 79707	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name K MICHAEL CONAWAY	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TX District: 11	
C.	Full Name (Last, First, Middle Initial) <b>CONSERVATIVE AMERICAN NETWORK DELIVERING INCREASED CONGRESSIONAL EXCELLENCE (CANDICE-PAC)</b>	<b>Transaction ID:</b> SB23.12632
	Mailing Address PO BOX 183370	Date of Disbursement 06 / 28 / 2011
	City SHELBY TOWNSHIP State MI Zip Code 48318	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

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

**3000.00**

**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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) JIM MR. COSTA</p> <p>Mailing Address 2037 W Bullard Avenue PMB 355</p> <p>City Fresno State CA Zip Code 93711</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name JIM MR. COSTA</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 20</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12297</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) ERIC ALAN RICK CRAWFORD</p> <p>Mailing Address 34 CR 455</p> <p>City JONESBORO State AR Zip Code 72404</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name ERIC ALAN RICK CRAWFORD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AR District: 01</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12258</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) ERIC ALAN RICK CRAWFORD</p> <p>Mailing Address 34 CR 455</p> <p>City JONESBORO State AR Zip Code 72404</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name ERIC ALAN RICK CRAWFORD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AR District: 01</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12527</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 7 / 2 0 1 1</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>3000.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

# 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) <b>MARK CRITZ</b>	<b>Transaction ID:</b> SB23.12290
	Mailing Address 201 FREDERICK ST	Date of Disbursement MM / DD / YYYY 03 / 15 / 2011
	City JOHNSTOWN State PA Zip Code 15902	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name <b>MARK CRITZ</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>HENRY R CUELLAR</b>	<b>Transaction ID:</b> SB23.12503
	Mailing Address 1519 Washington Street 2nd Floor Suite 200	Date of Disbursement MM / DD / YYYY 05 / 16 / 2011
	City LAREDO State TX Zip Code 78042	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name <b>HENRY R CUELLAR</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 28	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>GEOFFREY C. DAVIS</b>	<b>Transaction ID:</b> SB23.12588
	Mailing Address PO BOX 17192	Date of Disbursement MM / DD / YYYY 06 / 30 / 2011
	City FT MITCHELL State KY Zip Code 41017	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name <b>GEOFFREY C. DAVIS</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> 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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) ROSA DELAURO	Transaction ID: SB23.12337 Date of Disbursement 05 / 04 / 2011
	Mailing Address 49 Huntington Street	Amount of Each Disbursement this Period 1000.00
	City New Haven State CT Zip Code 06511	
	Purpose of Disbursement	Category/Type
	Candidate Name ROSA DELAURO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 03	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SCOTT EUGENE DESJARLAIS	Transaction ID: SB23.12283 Date of Disbursement 03 / 02 / 2011
	Mailing Address 639 SWEETENS COVE RD	Amount of Each Disbursement this Period 1000.00
	City SOUTH PITTSBURG State TN Zip Code 37380	
	Purpose of Disbursement	Category/Type
	Candidate Name SCOTT EUGENE DESJARLAIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) SCOTT EUGENE DESJARLAIS	Transaction ID: SB23.12526 Date of Disbursement 06 / 07 / 2011
	Mailing Address 639 SWEETENS COVE RD	Amount of Each Disbursement this Period 1000.00
	City SOUTH PITTSBURG State TN Zip Code 37380	
	Purpose of Disbursement	Category/Type
	Candidate Name SCOTT EUGENE DESJARLAIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) JEFF DUNCAN	Transaction ID: SB23.12542 Date of Disbursement 06 / 17 / 2011
	Mailing Address PO BOX 732	Amount of Each Disbursement this Period 1000.00
	City CLINTON State SC Zip Code 29325	
	Purpose of Disbursement	Category/Type
	Candidate Name JEFF DUNCAN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RENEE JACISIN ELLMERS	Transaction ID: SB23.12277 Date of Disbursement 03 / 02 / 2011
	Mailing Address 122 KINGSWAY DR	Amount of Each Disbursement this Period 1000.00
	City DUNN State NC Zip Code 28334	
	Purpose of Disbursement	Category/Type
	Candidate Name RENEE JACISIN ELLMERS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RENEE JACISIN ELLMERS	Transaction ID: SB23.12525 Date of Disbursement 06 / 07 / 2011
	Mailing Address 122 KINGSWAY DR	Amount of Each Disbursement this Period 1000.00
	City DUNN State NC Zip Code 28334	
	Purpose of Disbursement	Category/Type
	Candidate Name RENEE JACISIN ELLMERS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.

Full Name (Last, First, Middle Initial)  
RANDOLPH BLAKE FARENTHOLD

Transaction ID: SB23.12317  
Date of Disbursement

Mailing Address 5601 OCEAN DRIVE

/   /

City State Zip Code  
CORPUS CHRISTI TX 78412

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
RANDOLPH BLAKE FARENTHOLD

Category/  
Type

Office Sought:  House  Senate  President  
State: TX District: 27  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
Rep. SAM FARR

Transaction ID: SB23.12332  
Date of Disbursement

Mailing Address P.O. Box 7548  
SE CORNER SANTA LUCIA/CAMINO REAL

/   /

City State Zip Code  
Carmel CA 93920

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
Rep. SAM FARR

Category/  
Type

Office Sought:  House  Senate  President  
State: CA District: 17  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

C.

Full Name (Last, First, Middle Initial)  
STEVE FINCHER

Transaction ID: SB23.12246  
Date of Disbursement

Mailing Address PO BOX 11153

/   /

City State Zip Code  
JACKSON TN 38308

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
STEVE FINCHER

Category/  
Type

Office Sought:  House  Senate  President  
State: TN District: 08  
Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

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)

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<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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) STEVE FINCHER	Transaction ID: SB23.12285 Date of Disbursement 03 / 02 / 2011
	Mailing Address PO BOX 11153	Amount of Each Disbursement this Period 1000.00
	City JACKSON State TN Zip Code 38308	Category/ Type
	Purpose of Disbursement	
Candidate Name STEVE FINCHER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) BILL FLORES	Transaction ID: SB23.12544 Date of Disbursement 06 / 17 / 2011
	Mailing Address 1701 SOUTHWEST PARKWAY SUITE 208	Amount of Each Disbursement this Period 1000.00
	City COLLEGE STATION State TX Zip Code 77840	Category/ Type
	Purpose of Disbursement	
Candidate Name BILL FLORES	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 17	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) CORY GARDNER	Transaction ID: SB23.12315 Date of Disbursement 03 / 01 / 2011
	Mailing Address PO BOX 2408	Amount of Each Disbursement this Period 1000.00
	City LOVELAND State CO Zip Code 80539	Category/ Type
	Purpose of Disbursement	
Candidate Name CORY GARDNER	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

**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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) ROBERT BRIAN MR. GIBBS	Transaction ID: SB23.12333
	Mailing Address 6992 TR 466	Date of Disbursement 03 / 01 / 2011
	City LAKEVILLE State OH Zip Code 44638	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name ROBERT BRIAN MR. GIBBS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) ROBERT BRIAN MR. GIBBS	Transaction ID: SB23.12281
	Mailing Address 6992 TR 466	Date of Disbursement 03 / 02 / 2011
	City LAKEVILLE State OH Zip Code 44638	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name ROBERT BRIAN MR. GIBBS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 18	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) CHRIS P GIBSON	Transaction ID: SB23.12279
	Mailing Address PO BOX 543	Date of Disbursement 03 / 02 / 2011
	City KINDERHOOK State NY Zip Code 12106	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name CHRIS P GIBSON	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) CHRIS P GIBSON  Mailing Address PO BOX 543  City KINDERHOOK State NY Zip Code 12106  Purpose of Disbursement <input type="text"/>  Candidate Name CHRIS P GIBSON Category/Type <input type="text"/>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 20	Transaction ID: SB23.12340 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 1  Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
<b>B.</b>	Full Name (Last, First, Middle Initial) ROBERT W GOODLATTE  Mailing Address 3725 Dogwood Lane  City Roanoke State VA Zip Code 24014  Purpose of Disbursement <input type="text"/>  Candidate Name ROBERT W GOODLATTE Category/Type <input type="text"/>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 06	Transaction ID: SB23.12341 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 1  Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
<b>C.</b>	Full Name (Last, First, Middle Initial) VICKY HARTZLER  Mailing Address 22804 E 299TH ST  City HARRISONVILLE State MO Zip Code 64701  Purpose of Disbursement <input type="text"/>  Candidate Name VICKY HARTZLER Category/Type <input type="text"/>  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District: 04	Transaction ID: SB23.12238 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 5 / 2 0 1 1  Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

**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)

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<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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) VICKY HARTZLER	Transaction ID: SB23.12276 Date of Disbursement 03 / 02 / 2011
	Mailing Address 22804 E 299TH ST	Amount of Each Disbursement this Period 1000.00
	City HARRISONVILLE State MO Zip Code 64701	
	Purpose of Disbursement	Category/Type
	Candidate Name VICKY HARTZLER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHN HOEVEN	Transaction ID: SB23.12573 Date of Disbursement 06 / 28 / 2011
	Mailing Address 1131 NORTH 4TH STREET	Amount of Each Disbursement this Period 1000.00
	City BISMARCK State ND Zip Code 58501	
	Purpose of Disbursement	Category/Type
	Candidate Name JOHN HOEVEN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) TIMOTHY A HUELSKAMP	Transaction ID: SB23.12273 Date of Disbursement 03 / 02 / 2011
	Mailing Address 601 CHURCH	Amount of Each Disbursement this Period 1000.00
	City FOWLER State KS Zip Code 67844	
	Purpose of Disbursement	Category/Type
	Candidate Name TIMOTHY A HUELSKAMP	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 01	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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

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<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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b>	Full Name (Last, First, Middle Initial) TIMOTHY A HUELSKAMP	Transaction ID: SB23.12295
	Mailing Address 601 CHURCH	Date of Disbursement 04 / 08 / 2011
	City FOWLER State KS Zip Code 67844	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Candidate Name TIMOTHY A HUELSKAMP Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 01 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) RANDY HULTGREN	Transaction ID: SB23.12268
	Mailing Address 1S651 VERDUN DRIVE	Date of Disbursement 03 / 02 / 2011
	City WINFIELD State IL Zip Code 60190	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Candidate Name RANDY HULTGREN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) RANDY HULTGREN	Transaction ID: SB23.12501
	Mailing Address 1S651 VERDUN DRIVE	Date of Disbursement 05 / 16 / 2011
	City WINFIELD State IL Zip Code 60190	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Candidate Name RANDY HULTGREN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Rep. DUNCAN HUNTER <hr/> Mailing Address 9340 FUERTE DRIVE SUITE 302 <hr/> City LA MESA State CA Zip Code 91941 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name Rep. DUNCAN HUNTER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 52 <hr/> Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.12577 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) Rep. MARCY KAPTUR <hr/> Mailing Address P.O. Box 899 <hr/> City Toledo State OH Zip Code 43697 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name Rep. MARCY KAPTUR <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 09 <hr/> Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.12561 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) WILLIAM RICHARD KEATING <hr/> Mailing Address 10 Adeline Place <hr/> City Quincy State MA Zip Code 02169 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name WILLIAM RICHARD KEATING <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 10 <hr/> Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.12292 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

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

3000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) JOHN P KLINE <hr/> Mailing Address 10085 170TH ST W <hr/> City LAKEVILLE State MN Zip Code 55044 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name JOHN P KLINE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 02 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.12557 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) RAUL RAFAEL LABRADOR <hr/> Mailing Address PO BOX 1616 <hr/> City BOISE State ID Zip Code 83701 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name RAUL RAFAEL LABRADOR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.12321 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) JEFFREY M LANDRY <hr/> Mailing Address 101 AUBOR LANE <hr/> City NEW IBERIA State LA Zip Code 70563 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name JEFFREY M LANDRY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 03 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.12329 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>



**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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Rep. THOMAS P LATHAM <hr/> Mailing Address PO BOX 71 <hr/> City CLARION State IA Zip Code 50525 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. THOMAS P LATHAM <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.12312 Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2011
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) JOHN H SR LEWIS <hr/> Mailing Address 103 SEWANNEE AVE N W <hr/> City ATLANTA State GA Zip Code 30314 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name JOHN H SR LEWIS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.12537 Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2011
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) BILLY LONG <hr/> Mailing Address 3246 E RIDGEVIEW <hr/> City SPRINGFIELD State MO Zip Code 65804 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name BILLY LONG <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.12538 Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2011
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) Rep. FRANK D LUCAS <hr/> Mailing Address RR2 BOX 136 <hr/> City CHEYENNE State OK Zip Code 73628 <hr/> Purpose of Disbursement <input type="text"/>	Transaction ID: SB23.12320 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text"/> 1000.00
	Candidate Name Rep. FRANK D LUCAS Category/Type <input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 03 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) CYNTHIA M LUMMIS <hr/> Mailing Address 3905 Bent Ave. N/A <hr/> City Cheyenne State WY Zip Code 82001 <hr/> Purpose of Disbursement <input type="text"/>	Transaction ID: SB23.12559 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text"/> 1000.00
	Candidate Name CYNTHIA M LUMMIS Category/Type <input type="text"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: 01 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) CLAIRE MCCASKILL <hr/> Mailing Address PO BOX 300077 <hr/> City ST LOUIS State MO Zip Code 63130 <hr/> Purpose of Disbursement <input type="text"/>	Transaction ID: SB23.12313 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text"/> 1000.00
	Candidate Name CLAIRE MCCASKILL Category/Type <input type="text"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 00 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

**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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<p><b>A.</b> Full Name (Last, First, Middle Initial) MICHAEL H MICHAUD</p> <p>Mailing Address 213 Lisbon Street</p> <p>City Lewiston State ME Zip Code 04240</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name MICHAEL H MICHAUD Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 02</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12347 <b>Date of Disbursement:</b> 05 / 11 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sen. E BENJAMIN NELSON</p> <p>Mailing Address P O BOX 540154</p> <p>City OMAHA State NE Zip Code 68154</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name Sen. E BENJAMIN NELSON Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12328 <b>Date of Disbursement:</b> 03 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) KRISTI LYNN NOEM</p> <p>Mailing Address PO BOX 852</p> <p>City SIOUX FALLS State SD Zip Code 57101</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name KRISTI LYNN NOEM Category/Type <input type="text"/></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00</p> <p>Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.12530 <b>Date of Disbursement:</b> 06 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>

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

3000.00

**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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) KRISTI LYNN NOEM	Transaction ID: SB23.12568 Date of Disbursement 06 / 28 / 2011
	Mailing Address PO BOX 852	Amount of Each Disbursement this Period 1000.00
	City SIOUX FALLS State SD Zip Code 57101	
	Purpose of Disbursement	Category/Type
	Candidate Name KRISTI LYNN NOEM	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: 00	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) PATRICK ALAN NUNNELEE	Transaction ID: SB23.12507 Date of Disbursement 05 / 16 / 2011
	Mailing Address 1816 WOODSIDE CIRCLE	Amount of Each Disbursement this Period 1000.00
	City TUPELO State MS Zip Code 38801	
	Purpose of Disbursement	Category/Type
	Candidate Name PATRICK ALAN NUNNELEE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ERIK PAULSEN	Transaction ID: SB23.12529 Date of Disbursement 06 / 15 / 2011
	Mailing Address PO Box 44369	Amount of Each Disbursement this Period 2000.00
	City Eden Prairie State MN Zip Code 55344	
	Purpose of Disbursement	Category/Type
	Candidate Name ERIK PAULSEN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4000.00
<b>TOTAL</b> 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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) ERIK PAULSEN <hr/> Mailing Address PO Box 44369 <hr/> City Eden Prairie State MN Zip Code 55344 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name ERIK PAULSEN Category/Type <input type="text"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 03	Transaction ID: SB23.12560 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 1	
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>	
	<hr/> Full Name (Last, First, Middle Initial) Rep. COLLIN CLARK PETERSON <hr/> Mailing Address 26192 FLOYD LAKE POINT ROAD <hr/> City DETROIT LAKES State MN Zip Code 56501 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. COLLIN CLARK PETERSON Category/Type <input type="text"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 07	
	Transaction ID: SB23.12288 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 1 1	
Amount of Each Disbursement this Period <input type="text" value="1000.00"/>		
<hr/> Full Name (Last, First, Middle Initial) Rep. COLLIN CLARK PETERSON <hr/> Mailing Address 26192 FLOYD LAKE POINT ROAD <hr/> City DETROIT LAKES State MN Zip Code 56501 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. COLLIN CLARK PETERSON Category/Type <input type="text"/> <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 07		
Transaction ID: SB23.12294 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 1		
Amount of Each Disbursement this Period <input type="text" value="500.00"/>		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text" value="2500.00"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

**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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.**

Full Name (Last, First, Middle Initial)  
JAMES B RENACCI

Mailing Address PO BOX 88

City WADSWORTH State OH Zip Code 44282

Purpose of Disbursement

Candidate Name JAMES B RENACCI Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: OH District: 16

**Transaction ID:** SB23.12581  
**Date of Disbursement:** 06 / 28 / 2011

Amount of Each Disbursement this Period: 1000.00

**B.**

Full Name (Last, First, Middle Initial)  
REID RIBBLE

Mailing Address 1959 SCHEURING ROAD APT. 10

City DE PERE State WI Zip Code 54115

Purpose of Disbursement

Candidate Name REID RIBBLE Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: WI District: 08

**Transaction ID:** SB23.12286  
**Date of Disbursement:** 03 / 02 / 2011

Amount of Each Disbursement this Period: 1000.00

**C.**

Full Name (Last, First, Middle Initial)  
REID RIBBLE

Mailing Address 1959 SCHEURING ROAD APT. 10

City DE PERE State WI Zip Code 54115

Purpose of Disbursement

Candidate Name REID RIBBLE Category/Type

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: WI District: 08

**Transaction ID:** SB23.12504  
**Date of Disbursement:** 05 / 16 / 2011

Amount of Each Disbursement this Period: 1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **3000.00**

**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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) Sen. PAT ROBERTS	Transaction ID: SB23.12550 Date of Disbursement 06 / 30 / 2011
	Mailing Address BOX 15	Amount of Each Disbursement this Period 1000.00
	City DODGE CITY State KS Zip Code 67801	
	Purpose of Disbursement	Category/Type
	Candidate Name Sen. PAT ROBERTS	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KS District: 00	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MARTHA ROBY	Transaction ID: SB23.12256 Date of Disbursement 03 / 02 / 2011
	Mailing Address 3260 BANKHEAD AVENUE	Amount of Each Disbursement this Period 1000.00
	City MONTGOMERY State AL Zip Code 36106	
	Purpose of Disbursement	Category/Type
	Candidate Name MARTHA ROBY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MARTHA ROBY	Transaction ID: SB23.12523 Date of Disbursement 06 / 07 / 2011
	Mailing Address 3260 BANKHEAD AVENUE	Amount of Each Disbursement this Period 1000.00
	City MONTGOMERY State AL Zip Code 36106	
	Purpose of Disbursement	Category/Type
	Candidate Name MARTHA ROBY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) MICHAEL ROGERS	Transaction ID: SB23.12536 Date of Disbursement 06 / 17 / 2011
	Mailing Address 123 East 13th Street	Amount of Each Disbursement this Period 1000.00
	City Anniston State AL Zip Code 36201	
	Purpose of Disbursement	Category/Type
	Candidate Name MICHAEL ROGERS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 03	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) MICHAEL J ROGERS	Transaction ID: SB23.12570 Date of Disbursement 06 / 28 / 2011
	Mailing Address 6899 CORRIGAN DRIVE	Amount of Each Disbursement this Period 1000.00
	City BRIGHTON State MI Zip Code 48116	
	Purpose of Disbursement	Category/Type
	Candidate Name MICHAEL J ROGERS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) JON RUNYAN	Transaction ID: SB23.12578 Date of Disbursement 06 / 28 / 2011
	Mailing Address 263 MT LAUREL RD	Amount of Each Disbursement this Period 1000.00
	City MT LAUREL State NJ Zip Code 08054	
	Purpose of Disbursement	Category/Type
	Candidate Name JON RUNYAN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) LINDA SANCHEZ	Transaction ID: SB23.12289 Date of Disbursement 03 / 15 / 2011
	Mailing Address 1212 S. Victory Blvd	Amount of Each Disbursement this Period 1000.00
	City BURBANK State CA Zip Code 91502	
	Purpose of Disbursement	Category/Type
	Candidate Name LINDA SANCHEZ	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 39	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ROBERT T MR. SCHILLING	Transaction ID: SB23.12270 Date of Disbursement 03 / 02 / 2011
	Mailing Address 1 GOEMBEL COURT	Amount of Each Disbursement this Period 1000.00
	City COLONA State IL Zip Code 61241	
	Purpose of Disbursement	Category/Type
	Candidate Name ROBERT T MR. SCHILLING	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ROBERT T MR. SCHILLING	Transaction ID: SB23.12528 Date of Disbursement 06 / 07 / 2011
	Mailing Address 1 GOEMBEL COURT	Amount of Each Disbursement this Period 1000.00
	City COLONA State IL Zip Code 61241	
	Purpose of Disbursement	Category/Type
	Candidate Name ROBERT T MR. SCHILLING	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 17	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.

Full Name (Last, First, Middle Initial)  
JAMES AUSTIN SCOTT

Transaction ID: SB23.12266  
Date of Disbursement

Mailing Address 621 MCCLENDON STREET

/   /

City State Zip Code  
ASHBURN GA 31714

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
JAMES AUSTIN SCOTT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: GA District: 08

B.

Full Name (Last, First, Middle Initial)  
JAMES AUSTIN SCOTT

Transaction ID: SB23.12296  
Date of Disbursement

Mailing Address 621 MCCLENDON STREET

/   /

City State Zip Code  
ASHBURN GA 31714

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
JAMES AUSTIN SCOTT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: GA District: 08

C.

Full Name (Last, First, Middle Initial)  
TIMOTHY SCOTT

Transaction ID: SB23.12571  
Date of Disbursement

Mailing Address 1405 ASHLEY RIVER ROAD

/   /

City State Zip Code  
CHARLESTON SC 29407

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name  
TIMOTHY SCOTT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: SC District: 01

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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) TERRI A. SEWELL	Transaction ID: SB23.12345 Date of Disbursement 05 / 09 / 2011
	Mailing Address P.O. BOX 1964	Amount of Each Disbursement this Period 1000.00
	City BIRMINGHAM State AL Zip Code 35201	
	Purpose of Disbursement	Category/Type
	Candidate Name TERRI A. SEWELL	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 07	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JOHN M SHIMKUS	Transaction ID: SB23.12586 Date of Disbursement 06 / 30 / 2011
	Mailing Address 504 SUMNER BOULEVARD	Amount of Each Disbursement this Period 2000.00
	City COLLINSVILLE State IL Zip Code 62234	
	Purpose of Disbursement	Category/Type
	Candidate Name JOHN M SHIMKUS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Rep. MICHAEL K SIMPSON	Transaction ID: SB23.12558 Date of Disbursement 06 / 28 / 2011
	Mailing Address PO BOX 1541	Amount of Each Disbursement this Period 1000.00
	City BOISE State ID Zip Code 83701	
	Purpose of Disbursement	Category/Type
	Candidate Name Rep. MICHAEL K SIMPSON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

4000.00

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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) WILLIAM STEVE II SOUTHERLAND	Transaction ID: SB23.12262
	Mailing Address PO BOX 1692	Date of Disbursement MM / DD / YYYY 03 / 02 / 2011
	City LYNN HAVEN State FL Zip Code 32444	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name WILLIAM STEVE II SOUTHERLAND	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) WILLIAM STEVE II SOUTHERLAND	Transaction ID: SB23.12524
	Mailing Address PO BOX 1692	Date of Disbursement MM / DD / YYYY 06 / 07 / 2011
	City LYNN HAVEN State FL Zip Code 32444	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name WILLIAM STEVE II SOUTHERLAND	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rep. DEBBIE STABENOW	Transaction ID: SB23.12564
	Mailing Address 7143 STEEPLE CHASE	Date of Disbursement MM / DD / YYYY 06 / 28 / 2011
	City LANSING State MI Zip Code 48917	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name Rep. DEBBIE STABENOW	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 00	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	3000.00
<b>TOTAL</b> 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)

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<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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) MARLIN A STUTZMAN	Transaction ID: SB23.12248 Date of Disbursement 03 / 01 / 2011
	Mailing Address 0250 W 600 N	
	City HOWE State IN Zip Code 46746	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name MARLIN A STUTZMAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) MARLIN A STUTZMAN	Transaction ID: SB23.12272 Date of Disbursement 03 / 02 / 2011
	Mailing Address 0250 W 600 N	
	City HOWE State IN Zip Code 46746	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name MARLIN A STUTZMAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Rep. MAC THORNBERY	Transaction ID: SB23.12308 Date of Disbursement 04 / 26 / 2011
	Mailing Address P O BOX 1006	
	City CLARENDON State TX Zip Code 79226	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	
	Candidate Name Rep. MAC THORNBERY	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 13	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3000.00

**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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) SCOTT R. TIPTON <hr/> Mailing Address 13552 C R 26 <hr/> City CORTEZ State CO Zip Code 81321 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name SCOTT R. TIPTON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.12260 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/Type <input type="checkbox"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) SCOTT R. TIPTON <hr/> Mailing Address 13552 C R 26 <hr/> City CORTEZ State CO Zip Code 81321 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name SCOTT R. TIPTON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.12502 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 6 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/Type <input type="checkbox"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) UNITED STATES BEET SUGAR ASSOCIATION POLITICAL ACTION COMMITTEE <hr/> Mailing Address 1156 15TH STREET NW SUITE 1019 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement <input type="checkbox"/> <hr/> Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.16333 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 5000.00
	Category/Type <input type="checkbox"/>
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>

# 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)  
MINN-DAK SUGAR PAC (MDSPAC)

**A.** Full Name (Last, First, Middle Initial)  
VALLEY POLITICAL ACTION COMMITTEE

Mailing Address P.O. Box 77693

City Washington State DC Zip Code 20013

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Transaction ID: SB23.12584  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Rep. GREGORY PAUL WALDEN

Mailing Address 1504 SHERMAN STREET

City HOOD RIVER State OR Zip Code 97031

Purpose of Disbursement

Candidate Name  
CYNTHIA M LUMMIS

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: WY District: 01

Transaction ID: SB23.12563  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

Mailing Address 4479 Foxglove Ln

City Weston State FL Zip Code 33331

Purpose of Disbursement

Candidate Name  
DEBBIE WASSERMAN SCHULTZ

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2012  Primary  General  Other (specify) ▼

State: FL District: 20

Transaction ID: SB23.12339  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**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 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)  
MINN-DAK SUGAR PAC (MDSPAC)

<b>A.</b> Full Name (Last, First, Middle Initial) PETER WELCH <hr/> Mailing Address 346 TOWN FARM ROAD <hr/> City HARTLAND State VT Zip Code 05048 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name PETER WELCH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.12343 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Rep. EDWARD WHITFIELD <hr/> Mailing Address 108 ALUMNI AVENUE <hr/> City HOPKINSVILLE State KY Zip Code 42240 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name Rep. EDWARD WHITFIELD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 01 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.12567 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) ROGER F WICKER <hr/> Mailing Address PO BOX 874 <hr/> City TUPELO State MS Zip Code 38802 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name ROGER F WICKER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.12331 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
	Category/ Type <input type="text"/>
	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<input type="text"/>



**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)

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<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)  
MINN-DAK SUGAR PAC (MDSPAC)

A.	Full Name (Last, First, Middle Initial) FREDERICA S WILSON	Transaction ID: SB23.12348 Date of Disbursement MM / DD / YYYY 05 / 11 / 2011
	Mailing Address 19821 NW 2ND AVENUE BOX 354	Amount of Each Disbursement this Period 1000.00
	City MIAMI GARDENS State FL Zip Code 33169	
	Purpose of Disbursement	Category/Type
	Candidate Name FREDERICA S WILSON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 17	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) STEVE WOMACK	Transaction ID: SB23.12304 Date of Disbursement MM / DD / YYYY 04 / 08 / 2011
	Mailing Address 134 N PLEASANT RIDGE DRIVE	Amount of Each Disbursement this Period 1000.00
	City ROGERS State AR Zip Code 72756	
	Purpose of Disbursement	Category/Type
	Candidate Name STEVE WOMACK	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 03	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

2000.00

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

11450.00