



# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
National Milk Producers Federation Political Action Committee (NMPF PAC)	FROM 8/1/88	TO 8/31/88	
	COLUMN A	COLUMN B	
	Total This Period	Calendar Year	
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
I. Itemized (use Schedule A).....			11(a)(i)
II. Unitemized.....			11(a)(ii)
III. Total.....(add I and II)>			11(a)(iii)
b. Political Party Committees.....			11(b)
c. Other Political Committees (such as PACs).....	1,000.00	21,000.00	11(c)
d. Total Contributions.....(add a I, b and c)>	1,000.00	21,000.00	11(d)
12. Transfers From Affiliated/Other Party Committees.....			12
13. All Loans Received.....			13
14. Loan Repayments Received.....			14
15. Offsets To Operating Expenditures (Refunds, Rebates, Etc.).....			15
16. Refunds of Contributions Made To Federal Candidates & Other Political Committees.....			16
17. Other Federal Receipts (Dividends, Interest, Etc.).....			17
18. Transfer from Nonfederal Account for Joint Activity.....			18
19. Total Receipts.....(add 11d, 12, 13, 14, 15, 16, 17, and 18)>	1,000.00	21,000.00	19
20. Total Federal Receipts.....(subtract line 18 from line 19)>	1,000.00	21,000.00	20
<b>II. Disbursements</b>			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
I. Federal Share.....			21(a)(i)
II. Non-Federal Share.....			21(a)(ii)
b. Other Federal Operating Expenditures.....		87.56	21(b)
c. Total Operating Expenditures.....(add a I, a II, and b)>		87.56	21(c)
22. Transfers to Affiliated /Other Party Committees.....			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	1,500.00	11,000.00	23
24. Independent Expenditures (use Schedule E).....			24
25. Coordinated Expenditures Made by Party Committees (2 USC 441a(6)) (see Schedule F).....			25
26. Loan Repayments Made.....			26
27. Loans Made.....			27
28. Refunds of Contributions To:			
a. Individual/Person Other Than Political Committees.....			28(a)
b. Political Party Committees.....			28(b)
c. Other Political Committees (such as PACs).....			28(c)
d. Total Contribution Refunds.....(add a, b and c)>			28(d)
29. Other Disbursements.....			29
30. Total Disbursements.....(add 21c, 22, 23, 24, 25, 26, 27, 28d and 29)>	1,500.00	11,087.56	30
31. Total Federal Disbursements.....(subtract line 21 a II from line 30)>	1,500.00	11,087.56	31
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (other than loans) from line 11d).....	1,000.00	21,000.00	32
33. Total Contribution Refunds (from line 28d).....			33
34. Net Contributions (other than loans)(subtract line 33 from 32).....	1,000.00	21,000.00	34
35. Total Federal Operating Expenditures.....(add 21 a) and 21 b)>		87.56	35
36. Offsets to Operating Expenditures (from line 16).....			36
37. Net Operating Expenditures.....(subtract line 38 from 35)>		87.56	37

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In full)

National Milk Producers Federation Political Action Committee (NMPF PAC)

A. Full Name, Mailing Address and ZIP Code Dairyland Cooperative Political Action Committee (LEA PAC) P.O. Box 4844 Syracuse, NY 13221-4844		Name of Employer Political Action Committee	Date(month day,year)  8/4/88	Amount of Each Receipt This Period  1,000.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(specify):		Occupation	Aggregate Year-to-Date	
B. Full Name, Mailing Address and ZIP Code		Name of Employer	Date(month day,year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(specify):		Occupation	Aggregate Year-to-Date	
C. Full Name, Mailing Address and ZIP Code		Name of Employer	Date(month day,year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(specify):		Occupation	Aggregate Year-to-Date	
D. Full Name, Mailing Address and ZIP Code		Name of Employer	Date(month day,year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(specify):		Occupation	Aggregate Year-to-Date	
E. Full Name, Mailing Address and ZIP Code		Name of Employer	Date(month day,year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(specify):		Occupation	Aggregate Year-to-Date	
F. Full Name, Mailing Address and ZIP Code		Name of Employer	Date(month day,year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(specify):		Occupation	Aggregate Year-to-Date	
G. Full Name, Mailing Address and ZIP Code		Name of Employer	Date(month day,year)	Amount of Each Receipt This Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other(specify):		Occupation	Aggregate Year-to-Date	
SUBTOTAL of Receipts This Page (optional) .....				1,000.00
TOTAL This Period (last page this line number only) .....				1,000.00

**SCHEDULE B  
ITEMIZED DISBURSEMENTS**

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

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**NAME OF COMMITTEE (In full)**

**National Milk Producers Federation Political Action Committee (NMPF PAG)**

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date(month day,year)	Amount of Each Disbursement This Period
Citizens for Gilman P.O. Box 3001 Middletown, NY 10940	1998 Primary R-NY Disbursement for: Other(specify) Primary General X	8/4/98	\$1,000.00
B. Full Name, Mailing Address and ZIP Code Friends of Roy Blunt P.O. Box 278 Strafford, MO 65757	1998 General R-MO Disbursement for: Other(specify) Primary General X	36,013.00	\$500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Other(specify) Primary General	Date(month day,year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Other(specify) Primary General	Date(month day,year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Other(specify) Primary General	Date(month day,year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Other(specify) Primary General	Date(month day,year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Other(specify) Primary General	Date(month day,year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Other(specify) Primary General	Date(month day,year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Other(specify) Primary General	Date(month day,year)	Amount of Each Disbursement This Period
<b>SUBTOTAL of Disbursements This Page (optional)</b> .....			<b>\$1,500.00</b>
<b>TOTAL This Period (last page this line number only)</b> .....			<b>\$1,500.00</b>

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 9-17-98
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SW</i> PREPARER	9-21-98 DATE PREPARED