

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION  
PUBLIC DISCLOSURE  
DIVISION

SEP 4 1 36 PM '96

USE FEC MAILING LABEL  
OR  
TYPE OR PRINT


|  |  |
|--|--|
| 1. NAME OF COMMITTEE (in full)<br><b>American Meat Institute Political Action Committee</b>  |  |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported<br><b>1700 North Moore Street, Suite 1600</b> | 2. FEC IDENTIFICATION NUMBER<br><b>G00024281</b>   |
| CITY STATE and ZIP CODE<br><b>Arlington, VA 22209</b>  | 3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M) |

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report
- Monthly Report Due On:  
 February 20     June 20     October 20  
 March 20     July 20     November 20  
 April 20     August 20     December 20  
 May 20     September 20     January 31
- Twelfth day report preceding General  
(Type of Election)  
election on 11/8/94 in the State of Virginia
- Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_
- (b) Is this Report an Amendment?  YES  NO

| SUMMARY   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date  |
|---|-------------------------|--|
| 5. Covering Period <u>10/1/94</u> through <u>10/19/94</u>                                     |                         |  |
| 6. (a) Cash on Hand January 1, 19 <u>94</u>   |                         | \$ 44,257.53   |
| (b) Cash on Hand at Beginning of Reporting Period   | \$ 53,175.45            |  |
| (c) Total Receipts (from Line 19)   | \$ 7,700.00             | \$ 64,839.47   |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)      | \$ 60,875.45            | \$ 109,097.00  |
| 7. Total Disbursements (from Line 30)   | \$ 6,022.19             | \$ 54,243.74   |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))                 | \$ 54,853.26            | \$ 54,853.26   |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)  | \$ -0-                  | For further information contact:<br>Federal Election Commission<br>399 E Street NW<br>Washington, DC 20453<br>Toll Free 800-426-9630<br>Local 202-219-3420 |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | \$ -0-                  |  |

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<br><b>Sara J. Lilygren</b>  | Date<br><b>8-29-96</b> |
| Signature of Treasurer<br> |                        |

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §427c.

# DETAILED SUMMARY PAGE

## OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

(revised 1/1/81)

| NAME OF COMMITTEE<br>American Meat Institute Political Action Committee |   | REPORT COVERING PERIOD<br>FROM 10/1/94 TO 10/19/94 |                           |
|---|---|--|---------------------------|
|   |   | COLUMN A<br>Total This Period                      | COLUMN B<br>Calendar Year |
| <b>I. Receipts</b>  |   |  |                           |
| 11.   | Contributions (other than loans) From:  |  |                           |
| a.  | Individual/Persons Other Than Political Committees                                    |  |                           |
| i.  | Itemized (use Schedule A)   | \$2,500.00   | \$32,523.00               |
| ii.   | Unitemized  | 200.00   | 12,223.69                 |
| iii.  | Total (add i and ii) >  | 2,700.00   | 44,746.69                 |
| b.  | Political Party Committees  | -0-  | -0-                       |
| c.  | Other Political Committees (such as PACs)   | 5,000.00   | 18,000.00                 |
| d.  | Total Contributions (add a ii, b and c) >   | 7,700.00   | 62,746.69                 |
| 12.   | Transfers From Affiliated/Other Party Committees                                      | -0-  | -0-                       |
| 13.   | All Loans Received  | -0-  | -0-                       |
| 14.   | Loan Repayments Received  | -0-  | -0-                       |
| 15.   | Offsets To Operating Expenditures (Refunds, Rebates, etc.)                            | -0-  | -0-                       |
| 16.   | Refunds of Contributions Made to Federal Candidates and Other Political Committees    | -0-  | 1,500.00                  |
| 17.   | Other Federal Receipts (Dividends, Interest, etc.)                                    | -0-  | 592.78                    |
| 18.   | Transfers from Nonfederal Account for Joint Activity                                  | -0-  | -0-                       |
| 19.   | Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >                            | 7,700.00   | 64,839.47                 |
| 20.   | Total Federal Receipts (subtract line 18 from line 19) >                              | 7,700.00   | 64,839.47                 |
| <b>II. Disbursements</b>  |   |  |                           |
| 21.   | Operating Expenditures:   |  |                           |
| a.  | Shared Federal/Non-Federal Activity (from Schedule H4)                                |  |                           |
| i.  | Federal Share   | -0-  | -0-                       |
| ii.   | Non-Federal Share   | -0-  | 13.50                     |
| b.  | Other Federal Operating Expenditures  | -0-  | -0-                       |
| c.  | Total Operating Expenditures (add a i, a ii, and b) >                                 | -0-  | 13.50                     |
| 22.   | Transfers to Affiliated/Other Party Committees  | -0-  | -0-                       |
| 23.   | Contributions to Federal Candidates/Committees and Other Political Committees         | 6,022.19   | 53,957.24                 |
| 24.   | Independent Expenditures (use Schedule E)   | -0-  | -0-                       |
| 25.   | Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F) | -0-  | -0-                       |
| 26.   | Loan Repayments Made  | -0-  | -0-                       |
| 27.   | Loans Made  | -0-  | -0-                       |
| 28.   | Refunds of Contributions To:  |  |                           |
| a.  | Individuals/Persons Other Than Political Committees                                   | -0-  | -0-                       |
| b.  | Political Party Committees  | -0-  | -0-                       |
| c.  | Other Political Committees (such as PACs)   | -0-  | -0-                       |
| d.  | Total Contribution Refunds (add a, b and c) >   | -0-  | -0-                       |
| 29.   | Other Disbursements   | -0-  | 273.00                    |
| 30.   | Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >                  | 6,022.19   | 54,230.24                 |
| 31.   | Total Federal Disbursements (subtract line 21 a i from line 30) >                     | 6,022.19   | 54,216.74                 |
| <b>III. Net Contributions/Operating Expenditures</b>                    |   |  |                           |
| 32.   | Total Contributions (other than loans) (from line 11d)                                | 7,700.00   | 64,839.47                 |
| 33.   | Total Contribution Refunds (from line 28d)  | -0-  | -0-                       |
| 34.   | Net Contributions (other than loans) (subtract line 33 from 32)                       | 7,700.00   | 64,839.47                 |
| 35.   | Total Federal Operating Expenditures (add 21 a and 21 b) >                            | -0-  | 13.50                     |
| 36.   | Offsets to Operating Expenditures (from line 15)                                      | -0-  | -0-                       |
| 37.   | Net Operating Expenditures (subtract line 36 from 35) >                               | -0-  | 13.50                     |

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)

American Meat Institute Political Action Committee

|   |  |                                      |  |
|---|--|--------------------------------------|--|
| A. Full Name, Mailing Address and ZIP Code<br>Leroy O. Lochmann<br>1425 Persimmon Drive<br>St. Charles, IL 60174-1344       | Name of Employer<br>ConAgra, Inc.      | Date (month, day, year)<br>10/3/94   | Amount of Each Receipt this Period<br>1,000.00 |
|   | Occupation<br>President                | Aggregate Year-to-Date > \$ 1,000.00 |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  |                                      |  |
| B. Full Name, Mailing Address and ZIP Code<br>Joel Dorfman<br>1755 Alexander Drive<br>Bloomfield, MI 48302                  | Name of Employer<br>Thorn Apple Valley | Date (month, day, year)<br>10/18/94  | Amount of Each Receipt this Period<br>1,000.00 |
|   | Occupation<br>President                | Aggregate Year-to-Date > \$ 1,000.00 |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  |                                      |  |
| C. Full Name, Mailing Address and ZIP Code<br>Henry Dorfman<br>31800 Nottingham<br>Franklin, MI 48015                       | Name of Employer<br>Thorn Apple Valley | Date (month, day, year)<br>10/10/94  | Amount of Each Receipt this Period<br>500.00   |
|   | Occupation<br>Meat Processor           | Aggregate Year-to-Date > \$ 500.00   |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  |                                      |  |
| D. Full Name, Mailing Address and ZIP Code  | Name of Employer                       | Date (month, day, year)              | Amount of Each Receipt this Period             |
|   | Occupation                             | Aggregate Year-to-Date > \$          |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  |                                      |  |
| E. Full Name, Mailing Address and ZIP Code  | Name of Employer                       | Date (month, day, year)              | Amount of Each Receipt this Period             |
|   | Occupation                             | Aggregate Year-to-Date > \$          |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  |                                      |  |
| F. Full Name, Mailing Address and ZIP Code  | Name of Employer                       | Date (month, day, year)              | Amount of Each Receipt this Period             |
|   | Occupation                             | Aggregate Year-to-Date > \$          |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  |                                      |  |
| G. Full Name, Mailing Address and ZIP Code  | Name of Employer                       | Date (month, day, year)              | Amount of Each Receipt this Period             |
|   | Occupation                             | Aggregate Year-to-Date > \$          |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |  |                                      |  |

SUBTOTAL of Receipts This Page (optional) ..... 2,500.00

TOTAL This Period (last page this line number only) ..... 2,500.00

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 11c

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NAME OF COMMITTEE (In Full)

American Meat Institute Political Action Committee (AMI-PAC)

| A. Full Name, Mailing Address and ZIP Code<br>TYPAC<br>P.O. Box 2020<br>Springdale, AR 72765                                | Name of Employer<br><br>Occupation | Date (month, day, year)<br>10/19/94 | Amount of Each Receipt this Period<br>\$5,000.00 |
|---|------------------------------------|-------------------------------------|--|
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                    | Aggregate Year-to-Date \$           |  |
| B. Full Name, Mailing Address and ZIP Code  |                                    | Name of Employer                    |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                    | Date (month, day, year)             |  |
| C. Full Name, Mailing Address and ZIP Code  |                                    | Name of Employer                    |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                    | Date (month, day, year)             |  |
| D. Full Name, Mailing Address and ZIP Code  |                                    | Name of Employer                    |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                    | Date (month, day, year)             |  |
| E. Full Name, Mailing Address and ZIP Code  |                                    | Name of Employer                    |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                    | Date (month, day, year)             |  |
| F. Full Name, Mailing Address and ZIP Code  |                                    | Name of Employer                    |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                    | Date (month, day, year)             |  |
| G. Full Name, Mailing Address and ZIP Code  |                                    | Name of Employer                    |  |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify): |                                    | Date (month, day, year)             |  |

**SUBTOTAL** of Receipts This Page (optional) ..... 5,000.00

**TOTAL** This Period (last page this line number only) ..... 5,000.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2  
FOR LINE NUMBER

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**NAME OF COMMITTEE (in Full)**

American West Institute Political Action Committee

| A. Full Name, Mailing Address and ZIP Code   | Purpose of Disbursement   | Date (month, day, year) | Amount of Each Disbursement This Period |
|--|---|-------------------------|---|
| The City Club<br>555 Thirteenth Street, N.W.<br>Washington, DC 20006   | Reception for R. Santorum<br>R/PA<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) In Kind Contribution | 10/11/94                | \$1,072.19                              |
| B. Full Name, Mailing Address and ZIP Code<br>Ron Lewis for Congress<br>1700 W. Abingdon Drive<br>#101<br>Alexandria, VA 22314 | Purpose of Disbursement<br>R/KY/CAND<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | 10/11/94                | \$ 500.00                               |
| C. Full Name, Mailing Address and ZIP Code<br>Klug for Congress, Inc.<br>P.O. Box 5619<br>Madison, WI 53705                    | Purpose of Disbursement<br>R/WI/2<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                      | 10/11/94                | \$ 500.00                               |
| D. Full Name, Mailing Address and ZIP Code<br>Inslee for Congress<br>104 N. West Street<br>Alexandria, VA 22314                | Purpose of Disbursement<br>D/WA/4<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                      | 10/4/94                 | \$ 250.00                               |
| E. Full Name, Mailing Address and ZIP Code<br>Oliver North for U.S. Senate<br>P.O. Box 10851<br>Chantilly, VA 22021            | Purpose of Disbursement<br>R/VA/CAND<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                   | 10/11/94                | \$1,000.00                              |
| F. Full Name, Mailing Address and ZIP Code<br>Friends of Bill Emerson<br>P.O. Box 16021<br>Alexandria, VA 22302                | Purpose of Disbursement<br>R/MO/8<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                      | 10/4/94                 | \$ 500.00                               |
| G. Full Name, Mailing Address and ZIP Code<br>Keep McDade in Congress<br>P.O. Box 16264<br>Alexandria, VA 22302-8264           | Purpose of Disbursement<br>R/PA/10<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                     | 10/4/94                 | \$ 500.00                               |
| H. Full Name, Mailing Address and ZIP Code<br>People for Ganske<br>5907 Grand Avenue<br>Des Moines, IA 50312                   | Purpose of Disbursement<br>R/IA/4/CAND<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                 | 10/4/94                 | \$ 500.00                               |
| I. Full Name, Mailing Address and ZIP Code<br>J.D. Hayworth for Congress<br>1901 East University, Suite 260<br>Mesa, AZ 83203  | Purpose of Disbursement<br>R/AZ/6/CAND<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify)                 | 10/4/94                 | \$ 500.00                               |

**SUBTOTAL** of Disbursements This Page (optional) ..... \$5,322.19

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 2 OF 2  
FOR LINE NUMBER

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**NAME OF COMMITTEE (In Full)**

American Meat Institute Political Action Committee

| A. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
|---|--|-------------------------|---|
| L.F. Payne for Congress<br>P.O. Box 2884<br>Washington, DC 20013  | D/VA/5   | 10/4/94                 | \$ 200.00                               |
| B. Full Name, Mailing Address and ZIP Code<br>Gill for Congress<br>416 Wilson Pike Circle<br>Suite 210<br>Brentwood, TN 37027 | 4/TN/6/CAND  | 10/10/94                | \$500.00                                |
| C. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| D. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| E. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| F. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| G. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| H. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |
| I. Full Name, Mailing Address and ZIP Code  | Purpose of Disbursement<br>Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) | Date (month, day, year) | Amount of Each Disbursement This Period |

SUBTOTAL of Disbursements This Page (optional) ..... \$ 700.00

TOTAL This Period (last page this line number only) ..... \$6,022.19

**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<br>8-28-96   |
| <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  |
|   |                         |
| <i>JH</i><br>PREPARER   | 9-4-96<br>DATE PREPARED |