

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

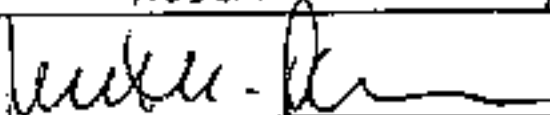
JUL 19 10 47 AM '98

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full) <i>Land O'Lakes, Inc., Political Action Committee</i>		2. FEC IDENTIFICATION NUMBER <i>C00009422</i>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <i>Box 64101</i>		
CITY, STATE and ZIP CODE <i>St. Paul, MN 55164</i>		
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
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____
- (b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. Covering Period <i>Apr 1, 98</i> through <i>Jun 30, 98</i>		
8. (a) Cash on Hand January 1, 19 <i>98</i>		\$ <i>21328.08</i>
(b) Cash on Hand at Beginning of Reporting Period	\$ <i>14053.36</i>	
(c) Total Receipts (from Line 19)	\$ <i>7649.74</i>	\$ <i>10912.02</i>
(d) Subtotal (add Lines 8(b) and 8(c) for Column A and Lines 8(a) and 8(c) for Column B)	\$ <i>21703.10</i>	\$ <i>32240.10</i>
7. Total Disbursements (from Line 20)	\$ <i>7523.25</i>	\$ <i>18060.25</i>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	\$ <i>14179.85</i>	\$ <i>14179.85</i>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <i>0</i>	For further information contact: Federal Election Commission 998 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ <i>0</i>	
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 <i>Robert M. Dever, Treasurer</i>		
Signature of Treasurer 		Date <i>7/13/98</i>

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

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FEC FORM 3X
(revised 11/93)

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

(revised 1/1/91)

NAME OF COMMITTEE <i>Land O'Lakes, Inc., Political Action</i>		REPORT COVERING PERIOD	
		FROM <i>Apr 1, 98</i>	TO <i>June 30, 98</i>
		COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts			
11.	Contributions (other than loans) From:		
a.	Individual/Persons Other Than Political Committees		
i.	Itemized (use Schedule A)	1200	2000
ii.	Unitemized	6400.88	8806.92
iii.	Total	7600.88	10806.92
b.	Political Party Committees	0	0
c.	Other Political Committees (such as PACs)	0	0
d.	Total Contributions	7600.88	10806.92
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	0
17.	Other Federal Receipts (Dividends, Interest, etc.)	48.86	105.10
18.	Transfers from Nonfederal Account for Joint Activity	0	0
19.	Total Receipts	7649.74	10912.02
20.	Total Federal Receipts	7649.74	10912.02
II. Disbursements			
21.	Operating Expenditures:		
a.	Shared Federal/Non-Federal Activity (from Schedule H4)		
i.	Federal Share	0	0
ii.	Non-Federal Share	0	0
b.	Other Federal Operating Expenditures	23.25	60.25
c.	Total Operating Expenditures	23.25	60.25
22.	Transfers to Affiliated/Other Party Committees	0	0
23.	Contributions to Federal Candidates/Committees and Other Political Committees	7500	18000
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	0	0
29.	Other Disbursements	0	0
30.	Total Disbursements	7523.25	18060.25
31.	Total Federal Disbursements	7523.25	18060.25
III. Net Contributions/Operating Expenditures			
32.	Total Contributions (other than loans)(from line 11d)	7600.88	10806.92
33.	Total Contribution Refunds (from line 28d)	0	0
34.	Net Contributions (other than loans)(subtract line 33 from 32)	7600.88	10806.92
35.	Total Federal Operating Expenditures	23.25	60.25
36.	Offsets to Operating Expenditures (from line 15)	0	0
37.	Net Operating Expenditures	23.25	60.25

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 11a.6.

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)

Land O'Lakes, Inc., Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Gordon Hoover 165 Cambridge Rd. Gap, PA 17527 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Farmer Aggregate Year-to-Date > \$ 200	5/28/98	200
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
David Noss Rt. 1, Box 638 Port Royal, PA 17082 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Farmer Aggregate Year-to-Date > \$ 200	6/30/98	200
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Martin Rasmussen 23231 River Rd NE St. Paul, OR 97137 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Farmer Aggregate Year-to-Date > \$ 200	6/30/98	200
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Ford Runge 901 W. Pine St. Stillwater, MN 55082 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	University of Minnesota Occupation: Professor Aggregate Year-to-Date > \$ 200	6/25/98	200
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Chuck Schilling RD #2, Box 227 Petersburg, PA 16669 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Farmer Aggregate Year-to-Date > \$ 200	6/25/98	200
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Pete Van Wychem W 656 Golden Glow Kaukauna, WI 54120 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Self Occupation: Farmer Aggregate Year-to-Date > \$ 200	6/30/98	200
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	 Occupation: Aggregate Year-to-Date > \$	 	

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

1200

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)

Land O'Lakes, Inc., Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Chris Dodd Box 33133 West Hartford, CT 06133	CT. Senate, Chris Dodd Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/4/98	500
B. Full Name, Mailing Address and ZIP Code Minge for Congress 360 10th Ave. Granite Falls, MN 56241	MN - 2, David Minge Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98 6/20	500
C. Full Name, Mailing Address and ZIP Code Earl Pomeroy for Congress Box 746 Bismarck, ND 58502	Earl Pomeroy, ND - AC Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	1000
D. Full Name, Mailing Address and ZIP Code Condit for Congress Box 555 Capitol Mall, Suite 1425 Sacramento, CA 95814	Gary Condit CA - 18 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500
E. Full Name, Mailing Address and ZIP Code People for Ganske 5907 Grand Ave Des Moines, IA 50312	Greg Ganske IA - 4 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500
F. Full Name, Mailing Address and ZIP Code Jay Johnson for Congress Box 8053 Green Bay, WI 54308	Jay Johnson WI - 8 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500
G. Full Name, Mailing Address and ZIP Code Ramstad Volunteer Committee 8100 Penn Ave. S., Suite 104 Bloomington, MN 55431	Jim Ramstad MN - 3 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500
H. Full Name, Mailing Address and ZIP Code Combest Congressional Committee Box 10667 Lubbock, TX 79408	Larry Combest TX - 19 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500
I. Full Name, Mailing Address and ZIP Code Kaptur for Congress Box 899 Toledo, OH 43691	Marcy Kaptur OH - 9 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500

SUBTOTAL of Disbursements This Page (optional)

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 23

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NAME OF COMMITTEE (in Full)

Land O'Lakes, Inc., Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Friends of Doc Hastings Box 2926 Pasco, WA 99302	Doc Hastings WA-4 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Stallings for Congress Box 205 Pocatello, ID 83204	Richard Stallings ID-2 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Ron Kind for Congress Box 184 LaCrosse, WI 54602	Ron Kind WI-3 Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	500
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Baester for Senate 2365 Harrodsburg Rd, Suite A-100 Lexington, KY 40504	Scotty Baester KY - Senate Disbursement for: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/26/98	1000
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		-
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	..	
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
	Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

7500

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 7/14/98
<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>[Signature]</i> PREPARER	 7/19/98 DATE PREPARED