

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation VIKING RANGE CORPORATION POLITICAL ACTION COMMITTEE		3. FEC Identification Number C C00425926
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported POST OFFICE BOX 956		
(c) City, State and ZIP Code GREENWOOD MS 38935		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report 24-Hour Report 48-Hour Report
 July 15 Quarterly Report
 October Quarterly Report
 January 31 Year-End Report

(b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

M	M
0	4

 /

D	D
0	1

 /

Y	Y	Y	Y
2	0	0	7

THROUGH

M	M
0	6

 /

D	D
3	0

 /

Y	Y	Y	Y
2	0	0	7

6. TOTAL CONTRIBUTIONS

7100.00

7. TOTAL INDEPENDENT EXPENDITURES.....

3024.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
JANE MOSS		07/12/2007

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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 FILER (In Full)
VIKING RANGE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) <u>Jane L Moss</u>			Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7		
Mailing Address 292 County Road 352			Transaction ID: F56.000001		
City	State	Zip Code	Amount of Each Receipt this Period 300.00		
Greenwood	MS	38930			
FEC ID number of contributing federal political committee. C <input type="text"/>					
Name of Employer Viking Range Corporation			Occupation CPA		

B. Full Name (Last, First, Middle Initial) <u>Waldrop M Brian</u>			Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7		
Mailing Address 111 Front Street			Transaction ID: F56.000002		
City	State	Zip Code	Amount of Each Receipt this Period 600.00		
Greenwood	MS	38930			
FEC ID number of contributing federal political committee. C <input type="text"/>					
Name of Employer			Occupation		

C. Full Name (Last, First, Middle Initial) <u>Woods Robert</u>			Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7		
Mailing Address 111 Front Street			Transaction ID: F56.000003		
City	State	Zip Code	Amount of Each Receipt this Period 300.00		
Greenwood	MS	38930			
FEC ID number of contributing federal political committee. C <input type="text"/>					
Name of Employer			Occupation		

D. Full Name (Last, First, Middle Initial) <u>Dale Persons</u>			Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7		
Mailing Address			Transaction ID: F56.000004		
City	State	Zip Code	Amount of Each Receipt this Period 600.00		
FEC ID number of contributing federal political committee. C <input type="text"/>					
Name of Employer			Occupation		

SUBTOTAL of Receipts This Page (optional)	1800.00
TOTAL This Period (last page carry total to Line 6)	

**SCHEDULE 5-A
ITEMIZED RECEIPTS**

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 FILER (In Full)
VIKING RANGE CORPORATION POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) <u>Fred E Carl, Jr</u>		Date of Receipt
Mailing Address		<input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Transaction ID: F56.000005
Name of Employer		Occupation
Amount of Each Receipt this Period		<input type="text" value="2500.00"/>

B. Full Name (Last, First, Middle Initial) <u>Margaret Carl</u>		Date of Receipt
Mailing Address		<input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Transaction ID: F56.000006
Name of Employer		Occupation
Amount of Each Receipt this Period		<input type="text" value="2500.00"/>

C. Full Name (Last, First, Middle Initial) <u>Tawana Thompson</u>		Date of Receipt
Mailing Address		<input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Transaction ID: F56.000007
Name of Employer		Occupation
Amount of Each Receipt this Period		<input type="text" value="300.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="5300.00"/>
TOTAL This Period (last page carry total to Line 6)	<input type="text" value="7100.00"/>

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

VIKING RANGE CORPORATION POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) of Payee
Citizens for Cochran

Date

/ /

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure
Primary election contribution

Category/
Type

Office Sought: House State: MS
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Thad Cochran

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Citizens for Cochran

Date

/ /

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure
General election donation

Category/
Type

Office Sought: House State: MS
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:
Thad Cochran

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For: Primary General
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Planters Bank

Date

/ /

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure
Bank fees

Category/
Type

Office Sought: House State: _____
 Senate
 President District: _____

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought

Disbursement For: Primary General
 Other (specify) _____

(a) **SUBTOTAL** of Itemized Independent Expenditures

(b) **SUBTOTAL** of Unitemized Independent Expenditures

(c) **TOTAL** Independent Expenditures
(carry total from last page forward to Line 7)