



FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

RQ-2

Adam M. Roberts, Treasurer
Humane USA Political Action Committee
P.O. Box 19224
Washington, DC 20036

APR 3 0 2003

Identification Number: C00350439

Reference: October Quarterly Report (7/1/02-9/30/02)

Dear Mr. Roberts:

This letter is prompted by the Commission's preliminary review of the report(s) referenced above. The review raised questions concerning certain information contained in the report(s). An itemization follows:

-Schedule B supporting Line 23 of your report discloses one or more contributions to a candidate(s) for the 2002 primary election; however, the funds were disbursed after the election date(s) (pertinent portion(s) attached). Please note that contributions may not be designated for an election which has already occurred unless the funds are to be used to reduce a candidate committee's debts incurred during that election campaign.

If any apparently impermissible contribution in question was incompletely or incorrectly disclosed, you should amend your original report with clarifying information.

If you have made an impermissible contribution, you must request a refund or provide a written authorization for a redesignation of the contribution pursuant to 11 CFR §110.2(b) within 60 days of the treasurer's receipt.

If the foregoing conditions for redesignations were not met within 60 days of the treasurer's receipt, your committee must obtain a refund.

Please inform the Commission of your corrective action immediately in writing and provide a photocopy of the refund or redesignation request sent

1103, 103, 840 6, 0, 1103

HUMANEUSA POLITICAL ACTION COMMITTEE-PAGE 2

-Commission Regulations require that a committee disclose the identification of all individuals who contribute in excess of \$200 in a calendar year. (11 CFR §104.3(a)(4)(i)) Identification for an individual is defined as the full name, mailing address, occupation and name of employer. (11 CFR §100.12) Your report discloses contributions from individuals for which the identification is not complete.

You must provide the missing information, or if you are unable to do so, you must demonstrate that "best efforts" have been used to obtain the information. To establish "best efforts," you must provide the Commission with a detailed description of your procedures for requesting the information. Establishing "best efforts" is a three-fold process.

First, your original solicitation must include a clear and conspicuous request for the contributor information and must inform the contributor of the requirements of federal law for the reporting of such information. (11 CFR §104.7(b)(1))

Second, if the information is not provided, you must make one follow-up, stand-alone effort to obtain this information, regardless of whether the contribution(s) was solicited or not. This effort must occur no later than 30 days after receipt of the contribution and may be in the form of a written request or an oral request documented in writing. (11 CFR § 104.7(b)(2)) The request must:

- clearly ask for the missing information, without soliciting a contribution;
- inform the contributor of the requirements of federal law for the reporting of such information, and
- if the request is written, include a pre-addressed post card or return envelope.

Third, if you receive contributor information after the contribution(s) has been reported, you shall either a) file with your next regularly scheduled report, an amended memo Schedule A listing all the contributions for which additional information was received; or b) file on or before your next regularly scheduled reporting date, amendments to the report(s) originally disclosing the contribution(s). (11 CFR §104.7(b)(4))

Please provide the missing information or a detailed description of your procedures for requesting the information. For more information on demonstrating "best efforts," please refer to the Campaign Guide.

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-Your report discloses limited payments for administrative expenses. Administrative expenses are payments made for the purpose of operating a political committee including, but not limited to, rent, utilities, salaries, telephone service, office equipment and supplies. Any such payments to a person aggregating in excess of \$200 in a calendar year must be disclosed on Schedule(s) B supporting Line 21(b) of the Detailed Summary Page. 2 U.S.C. §434(b)(5) If these expenses are being paid by a connected organization, your Statement of Organization must be amended to reflect this relationship. 2 U.S.C. §433(b)(2) In addition, if expenses have been incurred but not paid in a reporting period, the activity should be disclosed as a debt on Schedule D, if the obligation is \$500 or more, or outstanding for sixty days or more. 11 CFR §104.11

Any goods or services provided to your committee by a person, except volunteer activity (i.e., a person's time), would be considered an in-kind contribution from that person, and would be subject to the disclosure requirements of 2 U.S.C. §434(b)(3) and 11 CFR §104.13, and the limitations and prohibitions of 2 U.S.C. §§441a and 441b.

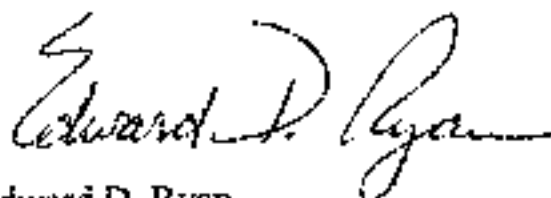
Clarification regarding administrative expenses should be disclosed during each two year election cycle beginning with the first report filed in the non-election year. Please verify that all expenses referenced above (i.e., rent, salaries, utilities, etc.) have been adequately disclosed. If these services have been provided by volunteers, please confirm this in writing.

-Itemized disbursements must include a brief statement or description of why the disbursements were made. Please amend Schedule B of your report to clarify the following description(s): consultant fee, expenses, and expenses reimbursement. For further guidance regarding acceptable purposes of disbursements, please refer to 11 CFR §104.3(b)(3).

-The independent expenditure schedule (Schedule E) should disclose the following information: the name and mailing address of the payee, the purpose of the expenditure, the date of payment, the amount of payment, the name and office sought, state and district (if applicable) of the federal candidate, an indication of whether the candidate was supported or opposed, the signature of the treasurer, and a notarized certification of the information provided. Please amend Schedule E by providing the name and mailing address of the payee and the name and office sought, state and district (if applicable) of the federal candidate. 11 CFR §104.3(b)(3)(vii)

A response or an amendment to your original report(s) correcting the above problem(s) should be filed with the Federal Election Commission within fifteen (15) days of the date of this letter. Electronic filers must file amendments (to include statements, designations and reports) in an electronic format and must submit an amended report in its entirety, rather than just these portions of the report that are being amended. If you need assistance, please feel free to contact me on our toll-free number, (800) 424-9530 (at the prompt press 1, then press 2 to reach the Reports Analysis Division). My local number is (202) 694-1130.

Sincerely,



Edward D. Ryan
Campaign Finance Analyst
Reports Analysis Division

2025 RELEASE UNDER E.O. 14176

**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

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)
HUMANEUSA POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
TIM JOHNSON

Date of Disbursement
07 / 30 / 2002

Mailing Address
PO BOX 1859
City: SIOUX FALLS State: SD Zip Code: 57101

Amount of Each Disbursement this Period
1000.00

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2002 *PRIMARY* Primary General Other (specify) *DATE 6/04/02*

State: SD District: 03

Transaction ID: SB23.8089 *ED*

B.

Full Name (Last, First, Middle Initial)
LOBIONDO FOR CONGRESS

Date of Disbursement
07 / 09 / 2002

Mailing Address
PO BOX 775
City: MARMORA State: NJ Zip Code: 08223

Amount of Each Disbursement this Period
500.00

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2002 *PRIMARY* Primary General Other (specify) *DATE 6/04/02*

State: NJ District: 02

Transaction ID: SB23.8072 *ED*

C.

Full Name (Last, First, Middle Initial)
RUSH HOLT FOR CONGRESS INC

Date of Disbursement
07 / 09 / 2002

Mailing Address
P.O. Box 762
City: Pennington State: NJ Zip Code: 08534

Amount of Each Disbursement this Period
1000.00

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought: House Senate President
Disbursement For: 2002 *PRIMARY* Primary General Other (specify) *DATE 6/04/02*

State: NJ District: 12

Transaction ID: SB23.8086 *ED*

SUBTOTAL of Disbursements This Page (optional) 2500.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21a	<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"/> 29

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NAME OF COMMITTEE (in Full)
HUMANEUSA POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. TANCREDO FOR CONGRESS COMMITTEE INC		Date of Disbursement 07 / 18 / 2002
Mailing Address PO Box 3756 PO Box 3756		Amount of Each Disbursement this Period 1000.00
City Littleton	State CO	
Zip Code 80131		Transaction ID: SB23.6080
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary Other (specify) ▼	
State: CO	District: 06	

Full Name (Last, First, Middle Initial) B. Robert Torricelli		Date of Disbursement 07 / 18 / 2002
Mailing Address 1300 CONNECTICUTT AVE NW SUITE 600		Amount of Each Disbursement this Period 1000.00
City Washington	State DC	
Zip Code 20036		Transaction ID: SB23.6079
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <i>Primary</i> <input checked="" type="checkbox"/> Primary Other (specify) ▼ <i>DATE 6/19/02</i>	
State: NJ	District:	

Full Name (Last, First, Middle Initial) C. UPTON FOR ALL OF US		Date of Disbursement 07 / 14 / 2002
Mailing Address PO BOX 490		Amount of Each Disbursement this Period 100.00
City ST JOSEPH	State MI	
Zip Code 49085		Transaction ID: SB23.6093
Purpose of Disbursement		
Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2002 <input checked="" type="checkbox"/> Primary Other (specify) ▼	
State: MI	District: 06	

SUBTOTAL of Disbursements This Page (optional)	2100.00
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)				PAGE 25/38
<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"/> 29
<input type="checkbox"/> 28	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c		

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NAME OF COMMITTEE (In Full)
HUMANEUSA POLITICAL ACTION COMMITTEE

A. WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) _____ Date of Disbursement
07 / 09 / 2002

Mailing Address
P.O. BOX 391
City: HOPKINSVILLE State: KY Zip Code: 42241 Amount of Each Disbursement this Period: 500.00

Purpose of Disbursement _____ Candidate Name _____ Category/Type _____

Office Sought: House Senate President Disbursement For: 2002 *PRIMARY* General *DATE 5/28/02* 2122

State: KY District: 01 Transaction ID: SB23.0070

B. WHITFIELD FOR CONGRESS COMMITTEE

Full Name (Last, First, Middle Initial) _____ Date of Disbursement
08 / 15 / 2002

Mailing Address
P.O. BOX 391
City: HOPKINSVILLE State: KY Zip Code: 42241 Amount of Each Disbursement this Period: 500.00

Purpose of Disbursement _____ Candidate Name _____ Category/Type _____

Office Sought: House Senate President Disbursement For: 2002 Primary General

State: KY District: 01 Transaction ID: SB23.0129

C.

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	5000.00

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