ORGANIC CONSUMERS FUND PAC

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2007 JUL 31 PM 4:18

July 31, 2007

Federal Election Commission 999 E St., NW Washington, DC 20463

Dear Sir or Madam:

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Enclosed is an amended Report of Receipts and Disbursements for the period November 28, 2006, through December 31, 2006.

The amended Report reflects the true debt owed to Hudson Bay, the company that administers the PAC and its fundraising. The original Report listed an estimate offered by the company at the time of the filing deadline. The amended Report is based on an accounting of actual expenses.

Thank you for your consideration.

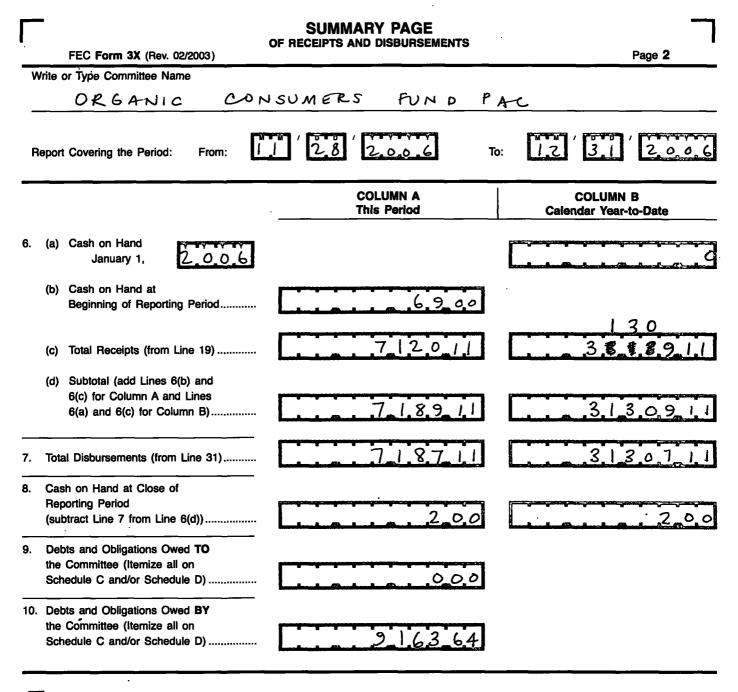
Sincerely,

Alexis Baden-Mayer Treasurer

1858 MINTWOOD PLACE, NW #4 • WASHINGTON DC • 20009 PHONE: 202-232-8997 • FAX: 202-232-8340

FEC FORM 3X	AND DIS	OF RECEIPTS BURSEMENTS An Authorized Committe	5 207	RECEIVED C MAIL CENTER JUL 31 PM 4: 18 Office Use Only
1. NAME OF COMMITTEE (in 1	TYPE OR PRINT V	Example: If typir over the lines.	g, type	5
DIR GAINI LC	$_1$ CONS 1 V 1 M 1 E 1 K 1 S	FUND PAC		
				<u> </u>
ADDRESS (number and ∇	street)	INITIMODIDIPILA		
Check if diffe				
reported. (AC		GTON		20101019-
2. FEC IDENTIFICA	TION NUMBER V		STATE 🔺	
C0042	6.3.3.8			MENDED A)
July 15 Quarterly October Quarterly January 3 Year-End July 31 M Report (N Year Only Terminatii (TER)	Report (Q1) Report (Q1) Report (Q2) Report (Q2) Report (Q3) Report (YE) Add Year Idon-election Report (d) 30-Day	Mar 20 (M3) Apr 20 (M4) Primary (12P ection for the: Election on Convention (Election on Convention (Convention (Co	un 20 (M6) Se ul 20 (M7) Oc) Genera 12C) Specia	in the State of (30R) Special (30S) in the State of
•	•	e best of my knowledge and t		2_0_0_6] nd complete.
Type or Print Name of Signature of Treasurer NOTE: Submission of fa	Toma	nformation may subject the pers	Date 0	7 2.00.7 the penalties of 2 U.S.C. §437g.
FE6AN026				FEC FORM 3X Rev. 12/2004

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This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

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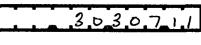
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DETAILED SUMMARY PAGE						
FEC Form 3X (Rev. 06/2004) of Receipts Page 3						
Write or Type Committee Name						
	SUMERS FUND PAC					
Report Covering the Period: From:	1 2.8 2.00 G	0: 12 31 2006				
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
 Contributions (other than loans) From: Individuals/Persons Other Than Political Committees 						
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	712011	3130911				
20. Total Federal Receipts (subtract Line 18(c) from Line 19)►	712011	3130911				

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	EEO Eerm 2V (Dov 02/2002)	of Disbursements	Dooc A
FEC Form 3X (Rev. 02/2003)			Page_4 COLUMN B
	II. Disbursements	Total This Period	COLUMN B Calendar Year-to-Date
1.	Operating Expenditures: (a) Allocated Federal/Non-Federal		
	Activity (from Schedule H4)		
	(i) Federal Share		
	(iii) Non-Federal Share	Ó	
	(b) Other Federal Operating		
	Expenditures	7.1.8.7.1.1	31_20.7_
	(c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b)) ▶	718711	31307
2.	Transfers to Affiliated/Other Party		
З.	Committees		
-	Federal Candidates/Committees and Other Political Committees	0	
4.	Independent Expenditures		
	(use Schedule E)	0	
25.	Coordinated Party Expenditures (2 U.S.C. §441a(d))		
	(2 U.S.C. §441a(d)) (use Schedule F)		
~			
ю.	Loan Repayments Made		
7	Loans Made	~	
8.	Refunds of Contributions To:		International In
	(a) Individuals/Persons Other Than Political Committees	0	
	(b) Political Party Committees		Laure and the second se
	(c) Other Political Committees		
	(such as PACs)		Internet the second second
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))►	6	
9.	Other Disbursements		
Ю.	Federal Election Activity (2 U.S.C. §431(20))		
	(a) Allocated Federal Election Activity (from Schedule H6)		
	(i) Federal Share	6	
	(ii) "Levin" Share	0	
	(b) Federal Election Activity Paid Entirely		
	With Federal Funds		
	(c) Total Federal Election Activity (add		· · · · · · · · · · · · · · · · · · ·
	Lines 30(a)(i), 30(a)(ii) and 30(b))►	0	Land the first of the first
1	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c)).	718711	30307
			30301
2.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	7-1.87-1.1	30307

FE6AN026



DETAILED SUMMARY PAGE

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of Disbursements

FEC Form 3X (Rev. 02/2003)		Page 5		
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
33. Total Contributions (other than loans) (from Line 11(d), page 3)	712011	3130911		
34. Total Contribution Refunds (from Line 28(d))	0	0		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	712011	3130911		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	712011	3130911		
37. Offsets to Operating Expenditures (from Line 15, page 3)		0		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	713211	3130911		

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SCHEDULE A (FEC Form 3X)	· · · · · · · · · · · · · · · · · · ·	FOR LINE NUMBER: PAGE) OF/		
ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the	(check only one)		
	Detailed Summary Page	11a 11b 11c 12		
		13 14 15 16 17		
Any information copied from such Reports and Statements n 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)				
	4 C 0 5 5	2		
	MERS FUND	PAC		
Full Name (Last, First, Middle Initial)	F C O	Date of Receipt		
A. <u>ALEXIS</u> <u>BADEN</u> : MAYEK Mailing Address				
1858 MINT WOOD PLA City State	CE NW #Y	12 31 2006		
•				
WASHINGTON DC	20009	Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.		<u> </u>		
Name of Employer Occupatio		MEMO;		
	NYER	EXEMPT LEGAL &		
Primary General Aggregate	e Year-to-Date ▼	ACCOUNTING SERVICES		
Other (specify)	150000			
		(PREPARING PAC FILINGS)		
Full Name (Last, First, Middle Initial)				
B. Mailing Address		Date of Receipt		
City State	Zip Code			
		Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.	and a subscription of the subscription of			
Name of Employer Occupation	n	-		
		4		
Receipt For: Aggregate	e Year-to-Date ▼			
Other (specify) ▼				
	<u></u>			
Full Name (Last, First, Middle Initial)				
C.		Date of Receipt		
Mailing Address				
City State	Zip Code			
		Amount of Each Receipt this Period		
FEC ID number of contributing				
federal political committee.	and a subserve for a first star of the subserve for a subserve for a subserve for a subserve for a subserve for	Land and a family of the family of the		
Name of Employer Occupation	n	-		
<u></u>		4		
Receipt For: Aggregate				
Other (specify)				
	- Andrew Strategy and and and and			
[
SUBTOTAL of Receipts This Page (optional)	••••••••••••••••••••••••••••••••••••••			
TOTAL This David /last ages this line number onto	<u></u>			
TOTAL This Period (last page this line number only)	▶	Laboration to a contraction of the		

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SCHEDULE B (FEC Form 3X)	·····	FOR LINE			AGE 1	OF J	
TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page		check only one)				
	Colanea Summary Page	27	28a 2	86 28		30	
Any information copied from such Reports and States or for commercial purposes, other than using the nar							
NAME OF COMMITTEE (In Full)							
ORGANIC CON	SUMERS FUN	JD PA	c				
Full Name (Last, First, Middle Initial)			Date of Disb	ursement	_		
HUDSON BAY COMP.	ANY OF IL		(Turter 17) / [6 7 6 7 / J	<u> </u>	᠙ᡩᡗ᠆ᡐ᠆ᡗ	
Mailing Address 941 OSTREET	BUITE 625						
City	State Zip Code						
LINCOLN Purpose of Disbursement	NE 6850	8					
TELEPHONE FUNDRAISING	<u>Г</u>	003	Amount of Ea	ach Disburs	ement th	is Period	
Candidate Name	╶──────────────────────────────────────	Category/		je na je na je na je na je re-			
		Туре			12		
Office Sought: House Disburse	Primary General	.					
President	Other (specify)						
State: District:	<u> </u>						
Full Name (Last, First, Middle Initial) 3.			Date of Disb	ursement			
				0 0 0 1 / 1	<u> </u>	<u>~~~</u>	
Mailing Address							
City	State Zip Code						
Purpose of Disbursement			Amount of Ea	ach Disburs	ement th	is Period	
Candidate Name	L	Category/					
		Туре				<u></u>	
Office Sought: House Disburser	nent For: Primary 🗍 General						
President	Other (specify) ▼	ļ					
State: District:							
Full Name (Last, First, Middle Initial) C.		[Date of Disb	urromont			
<i>y</i> .		.				7 -1-1-1	
Mailing Address					and and a		
City	State Zip Code						
Purpose of Disbursement			•				
Candidate Name	L	Category/	Amount of E	ach Disburs	ement th	is Period	
		Туре				<u></u>	
Office Sought: House Disburser	nent For: Primary						
President	Other (specify)						
State: District:			<u> </u>				
SUBTOTAL of Disbursements This Page (optional)		>					
					andreada Carageoração		
TOTAL This Period (last page this line number only))	••••••			12		

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SCHEDULE C (FEC Form 3X)

.OANS		Use separate schedule(for each category of the	PAGE OF	
		Detailed Summary Page	FOR LINE 13 OF FORM 3X	
NAME OF COMMITTEE (In Full)				
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	-,,, <u>-</u> -,,	Election:	
			Primary	
		······································	General Other (specify)	
Mailing Address				
City	State ZIP	Code		
Original Amount of Loan	Cumulative Payment	To Date Bala	nce Outstanding at Close of This Period	
		and Samlan day (Samlar a) Instal		
Date Incurred	Date Du	ue Interest Rate	Secured:	
	└┉╼┉┨ ╷ <mark>╽╦╼╓</mark> ┨╷╏		% (apr) Yes No	
	h	المستعينا الستبدقي	% (apr) Yes No	
List All Endorsers or Guarantors (if any) 1. Full Name (Last, First, Middle Initial)	to Loan Source	Name of Employee		
		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed		
		Outstanding:	and the second	
2. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
City State	ZIP Code	Amount Guaranteed		
City State		Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address	<u>.</u>	Occupation		
Maning Autress				
		Amount		
City State	ZIP Code	Guaranteed Outstanding:	Bart Bart Bart	
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed		
		Outstanding:	a an	
· · · · ·		e 7		
SUBTOTALS This Period This Page (optional)	······ [
	<u> </u>	[
TOTALS This Period (last page in this line or	ıly)	····· ►		
Carry outstanding balance only to LINE 3, Se	chedule D, for this line.	If no Schedule D, carry forv	vard to appropriate line of Summary.	

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SCHEDULE D (FEC Form 3X)	(Use separate	PAGE / OF /
DEBTS AND OBLIGATIONS	schedule(s)	
Excluding Loans	numbered line)	(check only one) 9
NAME OF COMMITTEE (In Full)		·
ORGANIC CONSUMERS FUN	O PAL	
A. Full Name (Last, First, Middle Initial) of Debtor or Creditor		Debt (Purpose):
HUDSON BAY COMPANY of IL	TELE	FPHONE
Mailing Address	FUND	RAISING
941 O STREET SUITE 62	5	
LINCOLN NE 68508		
Outstanding Balance Beginning This Period		
743170		
Amount Incurred This Period Payment This Period	Outstand	ing Balance at Close of This Period
173124		916364
	محمد التبعي	
B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of	Debt (Purpose):
Mailing Address		
City State Zip Code		
Outstanding Balance Beginning This Period		
Amount Incurred This Period Payment This Period	Outstand	ing Balance at Close of This Period
C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of	Debt (Purpose):
		Debit (r diposo).
Mailing Address		
City State Zip Code		
Outstanding Balance Regioning This Pariod		
Outstanding Balance Beginning This Period		
Amount Incurred This Period Payment This Period	Outstand	ing Balance at Close of This Period
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p-1		
1) SUBTOTALS This Period This Page (optional)		
2) TOTALS This Period (last page this line number only)		9162 91
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	▶ ┣	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page or	nly) ►	9 6 3 9 4

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