

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
HumaneUSA Federal PAC

ADDRESS (number and street) P.O. Box 19224
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00350439
3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 01 01 2010 through 03 31 2010

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 J. Scheele
Signature of Treasurer Electronically Filed by J. Scheele Date 04 14 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
HumaneUSA Federal PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		21844.22
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	21844.22									
(c) Total Receipts (from Line 19)	15818.16	15818.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	37662.38	37662.38								
7. Total Disbursements (from Line 31)	36723.59	36723.59								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	938.79	938.79								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
HumaneUSA Federal PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	15818.16	15818.16
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	15818.16	15818.16
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	15818.16	15818.16
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	15818.16	15818.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15818.16	15818.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5973.59	5973.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5973.59	5973.59
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30750.00	30750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	36723.59	36723.59
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	36723.59	36723.59

DETAILED SUMMARY PAGE
of Disbursements

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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)	15818.16	15818.16
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15818.16	15818.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5973.59	5973.59
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5973.59	5973.59

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 24
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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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 Federal PAC

A.

Full Name (Last, First, Middle Initial)
HOWARD BASKIN

Mailing Address 7106 RIVERWOOD

City State Zip Code
TAMPA FL 33615

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation Management Const.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 02 / 2010

Transaction ID: A2010-410396

Amount of Each Receipt this Period
5000.00

B.

Full Name (Last, First, Middle Initial)
HARRIETT M CROSBY

Mailing Address 6515 79TH PLACE

City State Zip Code
CABIN JOHN MD 20818

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
MM / DD / YYYY
01 / 19 / 2010

Transaction ID: A2010-302694

Amount of Each Receipt this Period
4000.00

C.

Full Name (Last, First, Middle Initial)
MICHAEL MARKARIAN

Mailing Address 1206 MARYLAND AVE. NE

City State Zip Code
WASHINGTON DC 20002

FEC ID number of contributing federal political committee. **C**

Name of Employer HUMANE SOCIETY OF THE US Occupation Executive VP

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
MM / DD / YYYY
03 / 31 / 2010

Transaction ID: A2010-645209

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional) ► **14000.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 24
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) MARY MAX		Date of Receipt			
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D		M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 1 0			
	City	State	Zip Code	Transaction ID: A2010-410398		
	NEW YORK	NY	10024	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		454.54	
	Name of Employer Self Employed		Occupation HOMEMAKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		454.54		

B.	Full Name (Last, First, Middle Initial) MARY MAX		Date of Receipt			
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D		M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 1 0			
	City	State	Zip Code	Transaction ID: A2010-602821		
	NEW YORK	NY	10024	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		454.54	
	Name of Employer Self Employed		Occupation HOMEMAKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		909.08		

C.	Full Name (Last, First, Middle Initial) PETER MAX		Date of Receipt			
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D		M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 1 0			
	City	State	Zip Code	Transaction ID: A2010-410397		
	NEW YORK	NY	10024	Amount of Each Receipt this Period		
	FEC ID number of contributing federal political committee.		C		454.54	
	Name of Employer Self Employed		Occupation ARTIST			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		454.54		

SUBTOTAL of Receipts This Page (optional)	▶	1363.62
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 24	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) PETER MAX		Date of Receipt	
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D		M M / D D / Y Y Y Y 03 / 15 / 2010	
	City	State	Zip Code	Transaction ID: A2010-602822
	NEW YORK	NY	10024	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		454.54	
Name of Employer Self Employed		Occupation		
		ARTIST		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		909.08		

SUBTOTAL of Receipts This Page (optional)	▶	454.54
TOTAL This Period (last page this line number only)	▶	15818.16

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B315185 Date of Disbursement
	Mailing Address P.O. Box 19224	<input type="text" value="01"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement Salary - Program Director.	<input type="text" value="1346.08"/>
	Candidate Name Jina J Scheele	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B317389 Date of Disbursement
	Mailing Address P.O. Box 19224	<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement for long distance expense	<input type="text" value="30.00"/>
	Candidate Name Jina J Scheele	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	

C.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B317391 Date of Disbursement
	Mailing Address P.O. Box 19224	<input type="text" value="02"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement for fax/phone expense.	<input type="text" value="15.00"/>
	Candidate Name Jina J Scheele	<input type="text" value="001"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1391.08"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

A. Form/Schedule : **SB21B**

Transaction ID :

Totals for original vendors for reimbursed expenses disclosed on this report have not exceeded \$200 year-to-date as of March 31, 2010.

**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B317392 Date of Disbursement 02 / 05 / 2010
	Mailing Address P.O. Box 19224	
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Reimbursement for internet expense	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B317393 Date of Disbursement 02 / 05 / 2010
	Mailing Address P.O. Box 19224	
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Reimbursement for utilities expenses	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B317395 Date of Disbursement 02 / 19 / 2010
	Mailing Address P.O. Box 19224	
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 1346.08
	Purpose of Disbursement Salary - Program Director.	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional)

1396.08

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 12 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B326657 Date of Disbursement 03 / 05 / 2010
	Mailing Address P.O. Box 19224	
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Reimbursement for long distance expense	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B326659 Date of Disbursement 03 / 05 / 2010
	Mailing Address P.O. Box 19224	
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 15.00
	Purpose of Disbursement Reimbursement for fax/phone expense.	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	

C.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B326661 Date of Disbursement 03 / 05 / 2010
	Mailing Address P.O. Box 19224	
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Reimbursement for internet expense	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	65.00
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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B326663 Date of Disbursement 03 / 05 / 2010
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 30.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Reimbursement for utilities expenses	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B326669 Date of Disbursement 03 / 15 / 2010
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 116.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Reimbursement for US PO Box rental and postage	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

C.	Full Name (Last, First, Middle Initial) Lyris Technologies	Transaction ID: B326647 Date of Disbursement 03 / 02 / 2010
	Mailing Address 1202 Potomac St.	Amount of Each Disbursement this Period 200.00
	City Washington State DC Zip Code 20007	
	Purpose of Disbursement Website maintenance.	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	346.00
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 14 / 24

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.

Full Name (Last, First, Middle Initial)
Public Affairs Support Services Inc.

Transaction ID: B317397

Date of Disbursement

Mailing Address 1020 North Fairfax St. 5th Floor

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	5		2	0	1	0

City State Zip Code
Alexandria VA 22314

Amount of Each Disbursement this Period

2289.57

Purpose of Disbursement
PAC reporting and administration.

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: VA District:

Not Applicable

SUBTOTAL of Disbursements This Page (optional) ►

2289.57

TOTAL This Period (last page this line number only) ►

5487.73

**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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) Barbara Lee for Congress	Transaction ID: B299548 Date of Disbursement
	Mailing Address 1736 Franklin Street #550	<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City Oakland State CA Zip Code 94612	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="-1000.00"/>
	Candidate Name Barbara Lee	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		Voided: Original check dated 12/15/2009

B.	Full Name (Last, First, Middle Initial) Barbara Lee for Congress	Transaction ID: B314991 Date of Disbursement
	Mailing Address 1736 Franklin Street #550	<input type="text" value="01"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City Oakland State CA Zip Code 94612	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Barbara Lee	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of Barbara Boxer	Transaction ID: B324939 Date of Disbursement
	Mailing Address PO Box 411176	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City Los Angeles State CA Zip Code 90041	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2500.00"/>
	Candidate Name Barbara Boxer	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A. Full Name (Last, First, Middle Initial)
Congressman Waxman Campaign Committee

Mailing Address 6380 Wilshire Blvd. #1612

City Los Angeles State CA Zip Code 90048

Purpose of Disbursement
Contribution

Candidate Name
Henry A Waxman

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 30

Transaction ID: B324934
Date of Disbursement

03 / 16 / 2010

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Ken Calvert for Congress

Mailing Address PO Box 20123

City Riverside State CA Zip Code 92516

Purpose of Disbursement
Contribution

Candidate Name
Ken Calvert

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 44

Transaction ID: B325561
Date of Disbursement

03 / 23 / 2010

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
Gallegly for Congress

Mailing Address P.O. Box 940001

City Simi Valley State CA Zip Code 93094

Purpose of Disbursement
Contribution

Candidate Name
Elton Gallegly

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 24

Transaction ID: B325733
Date of Disbursement

03 / 25 / 2010

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)

4500.00

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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.

Full Name (Last, First, Middle Initial)
Gallegly for Congress

Transaction ID: B325734
Date of Disbursement

Mailing Address P.O. Box 940001

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	5		2	0	1	0

City State Zip Code
Simi Valley CA 93094

Amount of Each Disbursement this Period

750.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Elton Gallegly

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 24

B.

Full Name (Last, First, Middle Initial)
Perlmutter for Congress

Transaction ID: B324940
Date of Disbursement

Mailing Address 3440 Youngfield Street #264

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	2		2	0	1	0

City State Zip Code
Wheat Ridge CO 80033

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Ed Perlmutter

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CO District: 07

C.

Full Name (Last, First, Middle Initial)
Bennet for Colorado

Transaction ID: B325555
Date of Disbursement

Mailing Address PO Box 3078

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	3		2	0	1	0

City State Zip Code
Denver CO 80201

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Michael Bennet

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CO District:

SUBTOTAL of Disbursements This Page (optional)

2250.00

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)

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.

Full Name (Last, First, Middle Initial)
Blumenthal for U.S. Senate

Mailing Address 777 Summer Street

City State Zip Code
Stamford CT 06901

Purpose of Disbursement
Contribution

Candidate Name
Richard Blumenthal

Office Sought: House
 Senate
 President

State: CT District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B317266
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

B.

Full Name (Last, First, Middle Initial)
Schakowsky for Congress

Mailing Address P.O. Box 5130

City State Zip Code
Evanston IL 60204

Purpose of Disbursement
Contribution

Candidate Name
Janice D Schakowsky

Office Sought: House
 Senate
 President

State: IL District: 09

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B317400
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

C.

Full Name (Last, First, Middle Initial)
Dan Burton for Congress Committee

Mailing Address P.O. Box 50593

City State Zip Code
Indianapolis IN 46250

Purpose of Disbursement
Contribution

Candidate Name
Dan Burton

Office Sought: House
 Senate
 President

State: IN District: 05

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B325573
Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

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)

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<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) Whitfield for Congress Committee	Transaction ID: B325569 Date of Disbursement
	Mailing Address P.O. Box 391	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Hopkinsville State KY Zip Code 42241	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1500.00"/>
	Candidate Name Edward Whitfield	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kratovil for Congress	Transaction ID: B325558 Date of Disbursement
	Mailing Address 222 Main Sail Drive PO Box 518	<input type="text" value="03"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City Stevensville State MD Zip Code 21666	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name Frank M Kratovil	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Gary Peters for Congress	Transaction ID: B317401 Date of Disbursement
	Mailing Address PO Box 226	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City Bloomfield Hills State MI Zip Code 48303	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Gary Peters	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) Levin for Congress	Transaction ID: B325557 Date of Disbursement 03 / 23 / 2010
	Mailing Address PO Box 37	Amount of Each Disbursement this Period 1000.00
	City Roseville State MI Zip Code 48066	
	Purpose of Disbursement Contribution Candidate Name Sander M Levin Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MI District: 12	

B.	Full Name (Last, First, Middle Initial) McCaskill for Missouri 2012	Transaction ID: B315203 Date of Disbursement 02 / 22 / 2010
	Mailing Address 607 14th Street NW Suite 800	Amount of Each Disbursement this Period 1000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Contribution Candidate Name Claire McCaskill Category/Type 011	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MO District:	

C.	Full Name (Last, First, Middle Initial) Adler for Congress	Transaction ID: B325571 Date of Disbursement 03 / 25 / 2010
	Mailing Address 14 Knights Wood Drive	Amount of Each Disbursement this Period 500.00
	City Marlton State NJ Zip Code 08053	
	Purpose of Disbursement Contribution Candidate Name John Adler Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District: 03	

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 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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

<p>A. Full Name (Last, First, Middle Initial) Martin Heinrich for Congress</p> <p>Mailing Address 2118 Central Avenue SE #71</p> <p>City Albuquerque State NM Zip Code 87106</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Martin Heinrich</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NM District: 01</p>	<p>Transaction ID: B324933 Date of Disbursement 03 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Friends for Harry Reid</p> <p>Mailing Address P.O. Box 19163</p> <p>City Las Vegas State NV Zip Code 89132</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Harry Reid</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NV District:</p>	<p>Transaction ID: B314028 Date of Disbursement 01 / 21 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Friends for Harry Reid</p> <p>Mailing Address P.O. Box 19163</p> <p>City Las Vegas State NV Zip Code 89132</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Harry Reid</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NV District:</p>	<p>Transaction ID: B317403 Date of Disbursement 03 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>2500.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

<p>A. Full Name (Last, First, Middle Initial) Dina Titus for Congress</p> <p>Mailing Address P. O. Box 50614 Suite C5</p> <p>City Henderson State NV Zip Code 89016</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Dina Titus</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B325570 Date of Disbursement 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Steve Israel for Congress Committee</p> <p>Mailing Address PO Box 777</p> <p>City Deer Park State NY Zip Code 11729</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Steve Israel</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B317405 Date of Disbursement 03 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Friends of Schumer</p> <p>Mailing Address 509 Madison Ave Suite 1902</p> <p>City New York State NY Zip Code 10022</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Charles E Schumer</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B317402 Date of Disbursement 03 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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 23 / 24

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

<p>A. Full Name (Last, First, Middle Initial) John Hall for Congress</p> <p>Mailing Address PO Box 469</p> <p>City Beacon State NY Zip Code 12508</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name John Hall</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B325559 Date of Disbursement 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Friends of Dan Maffei</p> <p>Mailing Address PO Box 74</p> <p>City Syracuse State NY Zip Code 13214</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Dan Maffei</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B325560 Date of Disbursement 03 / 23 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Blumenauer for Congress</p> <p>Mailing Address 830 NE Holladay #105</p> <p>City Portland State OR Zip Code 97232</p> <p>Purpose of Disbursement Contribution Contribution</p> <p>Candidate Name Earl Blumenauer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 03</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B324935 Date of Disbursement 03 / 16 / 2010</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>

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 of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 24 / 24

<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	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A. Full Name (Last, First, Middle Initial) Jim Gerlach for Congress Committee <hr/> Mailing Address PO Box 87 <hr/> City Uwchland State PA Zip Code 19480 <hr/> Purpose of Disbursement Contribution Candidate Name Jim Gerlach Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B325572 Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2010
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) Keep Nick Rahall In Congress Cmte. <hr/> Mailing Address P O Box 64 <hr/> City Beckley State WV Zip Code 25802 <hr/> Purpose of Disbursement Contribution Candidate Name Nick J Rahall, II Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B324932 Date of Disbursement M M / D D / Y Y Y Y 03 / 16 / 2010
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

TOTAL This Period (last page this line number only) ►

30750.00