

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 07 01 2009 through 12 31 2009

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 09 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	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	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>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		2185.73
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	1491.46									
(c) Total Receipts (from Line 19)	67700.00	143273.50								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	69191.46	145459.23								
7. Total Disbursements (from Line 31)	47347.24	123615.01								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	21844.22	21844.22								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
HumaneUSA Federal PAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	66766.00	139957.00
(ii) Unitemized	934.00	3316.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	67700.00	143273.50
(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)	67700.00	143273.50
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))	67700.00	143273.50
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	67700.00	143273.50

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.....	16597.24	39865.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	16597.24	39865.01
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30500.00	83500.00
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.....	250.00	250.00
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))..	47347.24	123615.01
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	47347.24	123615.01

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	67700.00	143273.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	67700.00	143273.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	16597.24	39865.01
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	16597.24	39865.01

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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) LESLIE L ALEXANDER	Date of Receipt MM / DD / YYYY 09 / 02 / 2009
	Mailing Address 7809 AFTON VILLA COURT	Transaction ID: A2009-4882632
	City State Zip Code BOCA RATON FL 33433	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SELF EMPLOYED Occupation SPORTS TEAM OWNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

B.	Full Name (Last, First, Middle Initial) HOWARD BASKIN	Date of Receipt MM / DD / YYYY 09 / 14 / 2009
	Mailing Address 7106 RIVERWOOD	Transaction ID: A2009-4882639
	City State Zip Code TAMPA FL 33615	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer SELF EMPLOYED Occupation Management Conslt. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Thomas Bennigson	Date of Receipt MM / DD / YYYY 12 / 28 / 2009
	Mailing Address 4100 Redwood Road Ste. 10 PMB 219	Transaction ID: A2009-5636254
	City State Zip Code Oakland CA 94619	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Employed Occupation Attorney Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	15000.00
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 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A. Full Name (Last, First, Middle Initial)
Eric Bernthal

Mailing Address 8901 Persimmon Tree Toad

City Potomac State MD Zip Code 20854

FEC ID number of contributing federal political committee. C

Name of Employer LATHAM & WATKINS LLP Occupation Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 13 / 2009

Transaction ID: A2009-4656140

Amount of Each Receipt this Period 5000.00

B. Full Name (Last, First, Middle Initial)
BARBARA BIRDSEY

Mailing Address P.O. BOX 279

City WEST BARNSTABLE State MA Zip Code 02668

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Self Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 12 / 2009

Transaction ID: A2009-4656134

Amount of Each Receipt this Period 5000.00

C. Full Name (Last, First, Middle Initial)
CHARLES BIRDSEY

Mailing Address P.O. BOX 279

City WEST BARNSTABLE State MA Zip Code 02668

FEC ID number of contributing federal political committee. C

Name of Employer Self Employed Occupation Self Employed

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 08 / 12 / 2009

Transaction ID: A2009-4656135

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional) 15000.00

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: (check only one)	PAGE 8 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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) THOMAS DICARRADO	Date of Receipt MM / DD / YYYY 12 / 24 / 2009
	Mailing Address 123 ANGOLA ROAD	Transaction ID: A2009-5636213
	City State Zip Code CORNWALL NY 12518	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RETIRED Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) NANCY GROVE	Date of Receipt MM / DD / YYYY 12 / 31 / 2009
	Mailing Address 7 SUNNYMEADE DRIVE	Transaction ID: A2009-5420045
	City State Zip Code ST LOUIS MO 63124	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SELF EMPLOYED ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) Grace Markarian	Date of Receipt MM / DD / YYYY 08 / 05 / 2009
	Mailing Address 1206 Maryland Avenue	Transaction ID: A2009-4656137
	City State Zip Code Washington DC 20002	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation HumaneUSA Information Requested	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11000.00
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: (check only one)	PAGE 9 / 58
	<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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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.	Full Name (Last, First, Middle Initial) MARY MAX	Date of Receipt MM / DD / YYYY 07 / 02 / 2009
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D	Transaction ID: A2009-4144712
	City State Zip Code NEW YORK NY 10024	Amount of Each Receipt this Period 454.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Employed Occupation Self Employed HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2724.00	

B.	Full Name (Last, First, Middle Initial) MARY MAX	Date of Receipt MM / DD / YYYY 08 / 02 / 2009
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D	Transaction ID: A2009-4656139
	City State Zip Code NEW YORK NY 10024	Amount of Each Receipt this Period 454.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Employed Occupation Self Employed HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3178.00	

C.	Full Name (Last, First, Middle Initial) MARY MAX	Date of Receipt MM / DD / YYYY 09 / 02 / 2009
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D	Transaction ID: A2009-4882642
	City State Zip Code NEW YORK NY 10024	Amount of Each Receipt this Period 454.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Self Employed Occupation Self Employed HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3632.00	

SUBTOTAL of Receipts This Page (optional)	▶	1362.00
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 10 / 58
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A. Full Name (Last, First, Middle Initial)
MARY MAX

Mailing Address 118 RIVERSIDE DRIVE
APT 15 D

City State Zip Code
NEW YORK NY 10024

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

Name of Employer Self Employed Occupation
Self Employed HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4086.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 2 / 2 0 0 9

Transaction ID: A2009-5159848

Amount of Each Receipt this Period
454.00

B. Full Name (Last, First, Middle Initial)
MARY MAX

Mailing Address 118 RIVERSIDE DRIVE
APT 15 D

City State Zip Code
NEW YORK NY 10024

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

Name of Employer Self Employed Occupation
Self Employed HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4540.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 9

Transaction ID: A2009-5393850

Amount of Each Receipt this Period
454.00

C. Full Name (Last, First, Middle Initial)
PETER MAX

Mailing Address 118 RIVERSIDE DRIVE
APT 15 D

City State Zip Code
NEW YORK NY 10024

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

Name of Employer Self Employed Occupation
Self Employed ARTIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2912.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 7 / 1 4 / 2 0 0 9

Transaction ID: A2009-4144716

Amount of Each Receipt this Period
416.00

SUBTOTAL of Receipts This Page (optional) ► **1324.00**

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 11 / 58
(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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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.

Full Name (Last, First, Middle Initial) PETER MAX		Date of Receipt MM / DD / YYYY 08 / 11 / 2009
Mailing Address 118 RIVERSIDE DRIVE APT 15 D		Transaction ID: A2009-4656138
City NEW YORK	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 3328.00	

B.

Full Name (Last, First, Middle Initial) PETER MAX		Date of Receipt MM / DD / YYYY 09 / 11 / 2009
Mailing Address 118 RIVERSIDE DRIVE APT 15 D		Transaction ID: A2009-4882641
City NEW YORK	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 3744.00	

C.

Full Name (Last, First, Middle Initial) PETER MAX		Date of Receipt MM / DD / YYYY 10 / 14 / 2009
Mailing Address 118 RIVERSIDE DRIVE APT 15 D		Transaction ID: A2009-5159847
City NEW YORK	State NY	Zip Code 10024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 416.00
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 ▼ 4160.00	

SUBTOTAL of Receipts This Page (optional)	▶	1248.00
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: (check only one)	PAGE 12 / 58
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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 MM / DD / YYYY 11 / 11 / 2009
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D	Transaction ID: A2009-5393849
	City State Zip Code NEW YORK NY 10024	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 4576.00	

B.	Full Name (Last, First, Middle Initial) PETER MAX	Date of Receipt MM / DD / YYYY 12 / 11 / 2009
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D	Transaction ID: A2009-5636211
	City State Zip Code NEW YORK NY 10024	Amount of Each Receipt this Period 416.00
	FEC ID number of contributing federal political committee. C	
	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 ▼ 4992.00	

C.	Full Name (Last, First, Middle Initial) G. Karlin Michelson, M.D.	Date of Receipt MM / DD / YYYY 08 / 12 / 2009
	Mailing Address 13140 Boca De Canon Lane	Transaction ID: A2009-4656136
	City State Zip Code Los Angeles CA 90049	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Retired Occupation Physician	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	5832.00
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 13 / 58
(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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NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A.

Full Name (Last, First, Middle Initial)
WAYNE PACELLE

Mailing Address 1444 Church Street Suite 504

City Washington State DC Zip Code 20006

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

Name of Employer Humane Society of the US Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 08 / 2009

Transaction ID: A2009-4144713

Amount of Each Receipt this Period 5000.00

B.

Full Name (Last, First, Middle Initial)
EDGAR SMITH

Mailing Address 111 West 67th Street #33A
35TH FLOOR SUITE 3502

City NEW YORK State NY Zip Code 10023

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

Name of Employer E.O. SMITH & CO. Occupation INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 14 / 2009

Transaction ID: A2009-4882638

Amount of Each Receipt this Period 5000.00

C.

Full Name (Last, First, Middle Initial)
FRANCES STEVENSON

Mailing Address 60498 ARNOLD MARKET

City BEND State OR Zip Code 97702

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 02 / 2009

Transaction ID: A2009-4882633

Amount of Each Receipt this Period 1000.00

SUBTOTAL of Receipts This Page (optional) ► 11000.00

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 14 / 58	
	(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) Maureen Williams		Date of Receipt		
	Mailing Address 100 Cameron Station Blvd.		M M / D D / Y Y Y Y 1 1 / 2 3 / 2 0 0 9		
	City Alexandria	State VA	Zip Code 22304	Transaction ID: A2009-5393847	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00		
	Name of Employer SELF EMPLOYED	Occupation Self Employed			
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00			

SUBTOTAL of Receipts This Page (optional)	5000.00
TOTAL This Period (last page this line number only)	66766.00

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: B272519 Date of Disbursement 07 / 03 / 2009
	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 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 State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: B272519A Date of Disbursement 07 / 03 / 2009
	Mailing Address P.O. Box 660720	Amount of Each Disbursement this Period 30.00
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement Monthly long distance expense	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B272520 Date of Disbursement 07 / 03 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 15.00
	City Washington State DC Zip Code 20036	
	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 State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	45.00
TOTAL This Period (last page this line number only)	

A. Form/Schedule : **SB21B**

Transaction ID :

We are amending the 2009 Year-End Report in response to a Request for Additional Information to include memo entries that disclose original vendor information for reimbursed expenses. We also add for the record that the PAC does not maintain an office and therefore will not have any rent or mortgage payments.

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 17 / 58

<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) AT&T Mobility Mailing Address P.O. Box 6463 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Monthly fax/phone expense. Candidate Name	Transaction ID: B272520A Date of Disbursement 07 / 03 / 2009
	Amount of Each Disbursement this Period 8.00 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

B. Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 660720 City Dallas State TX Zip Code 75266 Purpose of Disbursement Monthly fax/phone expense. Candidate Name	Transaction ID: B272520B Date of Disbursement 07 / 03 / 2009
	Amount of Each Disbursement this Period 7.00 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

C. Full Name (Last, First, Middle Initial) J. Scheele Mailing Address P.O. Box 19224 City Washington State DC Zip Code 20036 Purpose of Disbursement Reimbursement for internet expense Candidate Name Jina J Scheele	Transaction ID: B272521 Date of Disbursement 07 / 03 / 2009
	Amount of Each Disbursement this Period 20.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	20.00
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 18 / 58

<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)
ComCast

Transaction ID: B272521A
Date of Disbursement

Mailing Address P.O. Box 3005

/ /

City State Zip Code
Southeastern PA 19398

Amount of Each Disbursement this Period

Purpose of Disbursement
Monthly internet expense

Category/
Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼
State: District: Not Applicable

B.

Full Name (Last, First, Middle Initial)
J. Scheele

Transaction ID: B272522
Date of Disbursement

Mailing Address P.O. Box 19224

/ /

City State Zip Code
Washington DC 20036

Amount of Each Disbursement this Period

Purpose of Disbursement
Reimbursement for utilities expenses

Category/
Type

Candidate Name
Jina J Scheele

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼
State: District: Not Applicable

C.

Full Name (Last, First, Middle Initial)
PEPCO

Transaction ID: B272522A
Date of Disbursement

Mailing Address 701 9th Street NW

/ /

City State Zip Code
Washington DC 20068

Amount of Each Disbursement this Period

Purpose of Disbursement
Monthly utilities expenses

Category/
Type

Candidate Name

[MEMO ITEM]

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼
State: District: Not Applicable

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)

<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: B272523 Date of Disbursement 07 / 20 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	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 Disbursement For: 2009 <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: B292529 Date of Disbursement 08 / 05 / 2009
	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 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: 2009 <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) Verizon	Transaction ID: B292529A Date of Disbursement 08 / 05 / 2009
	Mailing Address P.O. Box 660720	Amount of Each Disbursement this Period 30.00
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement Monthly long distance expense	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	▶	1376.08
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)

<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: B292530 Date of Disbursement 08 / 05 / 2009
	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. Candidate Name Jina J Scheele Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/Type

B.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: B292530A Date of Disbursement 08 / 05 / 2009
	Mailing Address P.O. Box 6463	
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period 8.00
	Purpose of Disbursement Monthly fax/phone expense. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/Type [MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: B292530B Date of Disbursement 08 / 05 / 2009
	Mailing Address P.O. Box 660720	
	City Dallas State TX Zip Code 75266	Amount of Each Disbursement this Period 7.00
	Purpose of Disbursement Monthly fax/phone expense. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	15.00
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 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

Mailing Address P.O. Box 19224

City State Zip Code
Washington DC 20036

Purpose of Disbursement
Reimbursement for internet expense

Candidate Name
Jina J Scheele

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B292531
Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

20.00

001
Category/
Type

B.

Full Name (Last, First, Middle Initial)
ComCast

Mailing Address P.O. Box 3005

City State Zip Code
Southeastern PA 19398

Purpose of Disbursement
Monthly internet expense

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B292531A
Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

20.00

[MEMO ITEM]

001
Category/
Type

C.

Full Name (Last, First, Middle Initial)
J. Scheele

Mailing Address P.O. Box 19224

City State Zip Code
Washington DC 20036

Purpose of Disbursement
Reimbursement for utilities expenses

Candidate Name
Jina J Scheele

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B292532
Date of Disbursement

08 / 05 / 2009

Amount of Each Disbursement this Period

30.00

001
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ►

50.00

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 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) PEPCO	Transaction ID: B292532A Date of Disbursement 08 / 05 / 2009
	Mailing Address 701 9th Street NW	Amount of Each Disbursement this Period 30.00
	City Washington State DC Zip Code 20068	
	Purpose of Disbursement Monthly utilities expenses	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B292534 Date of Disbursement 08 / 17 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	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: 2009 <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: B270579 Date of Disbursement 09 / 02 / 2009
	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: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
		Voided: Original check da- ted 06/05/2009

SUBTOTAL of Disbursements This Page (optional)	▶	1316.08
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)

<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)
PEPCO

Mailing Address 701 9th Street NW

City Washington State DC Zip Code 20068

Purpose of Disbursement
Monthly utilities expenses

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Transaction ID: B270579A
Date of Disbursement

09 / 02 / 2009

Amount of Each Disbursement this Period

-30.00

[MEMO ITEM]

Voided: Original check dated 06/05/2009

B.

Full Name (Last, First, Middle Initial)
J. Scheele

Mailing Address P.O. Box 19224

City Washington State DC Zip Code 20036

Purpose of Disbursement
Reimbursement for long distance expense

Candidate Name
Jina J Scheele

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Transaction ID: B270576
Date of Disbursement

09 / 02 / 2009

Amount of Each Disbursement this Period

-30.00

Voided: Original check dated 06/05/2009

C.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 660720

City Dallas State TX Zip Code 75266

Purpose of Disbursement
Monthly long distance expense

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

Transaction ID: B270576A
Date of Disbursement

09 / 02 / 2009

Amount of Each Disbursement this Period

-30.00

[MEMO ITEM]

Voided: Original check dated 06/05/2009

SUBTOTAL of Disbursements This Page (optional) ▶

-30.00

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 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: B270577
	Mailing Address P.O. Box 19224	Date of Disbursement MM / DD / YYYY 09 / 02 / 2009
	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	Voided: Original check dated 06/05/2009
	Disbursement For: 2009 <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) AT&T Mobility	Transaction ID: B270577A
	Mailing Address P.O. Box 6463	Date of Disbursement MM / DD / YYYY 09 / 02 / 2009
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period -8.00
	Purpose of Disbursement Monthly fax/phone expense.	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Voided: Original check dated 06/05/2009
	Disbursement For: 2009 <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) Verizon	Transaction ID: B270577B
	Mailing Address P.O. Box 660720	Date of Disbursement MM / DD / YYYY 09 / 02 / 2009
	City Dallas State TX Zip Code 75266	Amount of Each Disbursement this Period -7.00
	Purpose of Disbursement Monthly fax/phone expense.	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	[MEMO ITEM] Voided: Original check dated 06/05/2009
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
	State: District: Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	-15.00
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 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

<p>A. Full Name (Last, First, Middle Initial) J. Scheele</p> <p>Mailing Address P.O. Box 19224</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Reimbursement for internet expense</p> <p>Candidate Name Jina J Scheele</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B270578 Date of Disbursement 09 / 02 / 2009</p> <p>Amount of Each Disbursement this Period -20.00</p> <p>001 Category/ Type</p> <p>Voided: Original check dated 06/05/2009</p>
<p>B. Full Name (Last, First, Middle Initial) ComCast</p> <p>Mailing Address P.O. Box 3005</p> <p>City Southeastern State PA Zip Code 19398</p> <p>Purpose of Disbursement Monthly internet expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B270578A Date of Disbursement 09 / 02 / 2009</p> <p>Amount of Each Disbursement this Period -20.00</p> <p>001 Category/ Type</p> <p>[MEMO ITEM] Voided: Original check dated 06/05/2009</p>
<p>C. Full Name (Last, First, Middle Initial) J. Scheele</p> <p>Mailing Address P.O. Box 19224</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Reimbursement for long distance expense</p> <p>Candidate Name Jina J Scheele</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B294801 Date of Disbursement 09 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 30.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	10.00
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 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

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) Verizon	Transaction ID: B294801A Date of Disbursement 09 / 04 / 2009
	Mailing Address P.O. Box 660720	Amount of Each Disbursement this Period 30.00
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement Monthly long distance expense Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B294802 Date of Disbursement 09 / 04 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 15.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Reimbursement for fax/phone expense. Candidate Name Jina J Scheele	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

C.	Full Name (Last, First, Middle Initial) AT&T Mobility	Transaction ID: B294802A Date of Disbursement 09 / 04 / 2009
	Mailing Address P.O. Box 6463	Amount of Each Disbursement this Period 8.00
	City Carol Stream State IL Zip Code 60197	
	Purpose of Disbursement Monthly fax/phone expense. Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	15.00
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 27 / 58

<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) Verizon <hr/> Mailing Address P.O. Box 660720 <hr/> City Dallas State TX Zip Code 75266 <hr/> Purpose of Disbursement Monthly fax/phone expense. Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B294802B Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 7.00
	[MEMO ITEM]
	Category/ Type 001

B. Full Name (Last, First, Middle Initial) J. Scheele <hr/> Mailing Address P.O. Box 19224 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Reimbursement for internet expense Candidate Name Jina J Scheele <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B294803 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 20.00
	[MEMO ITEM]
	Category/ Type 001

C. Full Name (Last, First, Middle Initial) ComCast <hr/> Mailing Address P.O. Box 3005 <hr/> City Southeastern State PA Zip Code 19398 <hr/> Purpose of Disbursement Monthly internet expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B294803A Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 20.00
	[MEMO ITEM]
	Category/ Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	20.00
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 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: B294804
	Mailing Address P.O. Box 19224	Date of Disbursement MM / DD / YYYY 09 / 04 / 2009
	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: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) PEPCO	Transaction ID: B294804A
	Mailing Address 701 9th Street NW	Date of Disbursement MM / DD / YYYY 09 / 04 / 2009
	City Washington State DC Zip Code 20068	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Monthly utilities expenses	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B294805
	Mailing Address P.O. Box 19224	Date of Disbursement MM / DD / YYYY 09 / 14 / 2009
	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: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional)	1376.08
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)

<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

Mailing Address P.O. Box 19224

City Washington State DC Zip Code 20036

Purpose of Disbursement
Reimbursement for long distance expense

Candidate Name
Jina J Scheele

Office Sought: House Senate President

State: District:

Disbursement For: 2009 Primary General Other (specify) ▼

Not Applicable

Transaction ID: B296521
Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

30.00

001
Category/
Type

B.

Full Name (Last, First, Middle Initial)
Verizon

Mailing Address P.O. Box 660720

City Dallas State TX Zip Code 75266

Purpose of Disbursement
Monthly long distance expense

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2009 Primary General Other (specify) ▼

Not Applicable

Transaction ID: B296521A
Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

001
Category/
Type

C.

Full Name (Last, First, Middle Initial)
J. Scheele

Mailing Address P.O. Box 19224

City Washington State DC Zip Code 20036

Purpose of Disbursement
Reimbursement for fax/phone expense.

Candidate Name
Jina J Scheele

Office Sought: House Senate President

State: District:

Disbursement For: 2009 Primary General Other (specify) ▼

Not Applicable

Transaction ID: B296522
Date of Disbursement

10 / 05 / 2009

Amount of Each Disbursement this Period

15.00

001
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

45.00

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 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) AT&T Mobility Mailing Address P.O. Box 6463 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Monthly fax/phone expense. Candidate Name	Transaction ID: B296522A Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 8.00 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

B. Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 660720 City Dallas State TX Zip Code 75266 Purpose of Disbursement Monthly fax/phone expense. Candidate Name	Transaction ID: B296522B Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 7.00 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

C. Full Name (Last, First, Middle Initial) J. Scheele Mailing Address P.O. Box 19224 City Washington State DC Zip Code 20036 Purpose of Disbursement Reimbursement for internet expense Candidate Name Jina J Scheele	Transaction ID: B296523 Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 20.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶	20.00
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 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) ComCast <hr/> Mailing Address P.O. Box 3005 <hr/> City Southeastern State PA Zip Code 19398 <hr/> Purpose of Disbursement Monthly internet expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B296523A Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 20.00
	[MEMO ITEM]
	Category/Type: 001

B. Full Name (Last, First, Middle Initial) J. Scheele <hr/> Mailing Address P.O. Box 19224 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Reimbursement for utilities expenses Candidate Name Jina J Scheele <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B296524 Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 30.00
	Category/Type: 001
	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) PEPCO <hr/> Mailing Address 701 9th Street NW <hr/> City Washington State DC Zip Code 20068 <hr/> Purpose of Disbursement Monthly utilities expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B296524A Date of Disbursement 10 / 05 / 2009
	Amount of Each Disbursement this Period 30.00
	Category/Type: 001
	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	30.00
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 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: B296525 Date of Disbursement 10 / 09 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Salary - Program Director. Candidate Name Jina J Scheele	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <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: B296526 Date of Disbursement 10 / 30 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Salary - Program Director. Candidate Name Jina J Scheele	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <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: B299536 Date of Disbursement 11 / 05 / 2009
	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 long distance expense. Candidate Name Jina J Scheele	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	2722.16
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 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) Verizon <hr/> Mailing Address P.O. Box 660720 <hr/> City Dallas State TX Zip Code 75266 <hr/> Purpose of Disbursement Monthly long distance expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B299536A Date of Disbursement 11 / 05 / 2009
	Amount of Each Disbursement this Period 30.00
	[MEMO ITEM]
	Category/Type 001

B. Full Name (Last, First, Middle Initial) J. Scheele <hr/> Mailing Address P.O. Box 19224 <hr/> City Washington State DC Zip Code 20036 <hr/> Purpose of Disbursement Reimbursement for fax/phone expense. Candidate Name Jina J Scheele <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B299537 Date of Disbursement 11 / 05 / 2009
	Amount of Each Disbursement this Period 15.00
	Category/Type 001
	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) AT&T Mobility <hr/> Mailing Address P.O. Box 6463 <hr/> City Carol Stream State IL Zip Code 60197 <hr/> Purpose of Disbursement Monthly fax/phone expense. Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B299537A Date of Disbursement 11 / 05 / 2009
	Amount of Each Disbursement this Period 8.00
	Category/Type 001
	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	15.00
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 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) Verizon	Transaction ID: B299537B Date of Disbursement 11 / 05 / 2009
	Mailing Address P.O. Box 660720	Amount of Each Disbursement this Period 7.00
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement Monthly fax/phone expense.	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B299538 Date of Disbursement 11 / 05 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 20.00
	City Washington State DC Zip Code 20036	
	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: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) ComCast	Transaction ID: B299538A Date of Disbursement 11 / 05 / 2009
	Mailing Address P.O. Box 3005	Amount of Each Disbursement this Period 20.00
	City Southeastern State PA Zip Code 19398	
	Purpose of Disbursement Monthly internet expense	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	20.00
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 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: B299539 Date of Disbursement 11 / 05 / 2009
	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 Candidate Name Jina J Scheele	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

B.	Full Name (Last, First, Middle Initial) PEPCO	Transaction ID: B299539A Date of Disbursement 11 / 05 / 2009
	Mailing Address 701 9th Street NW	Amount of Each Disbursement this Period 30.00
	City Washington State DC Zip Code 20068	
	Purpose of Disbursement Monthly utilities expenses Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B299541 Date of Disbursement 11 / 27 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Salary - Program Director. Candidate Name Jina J Scheele	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	1376.08
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)

<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: B313955 Date of Disbursement 12 / 04 / 2009
	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 long distance expense Candidate Name Jina J Scheele	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

B.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: B313955A Date of Disbursement 12 / 04 / 2009
	Mailing Address P.O. Box 660720	Amount of Each Disbursement this Period 30.00
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement Monthly long distance expense Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B313957 Date of Disbursement 12 / 04 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 15.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Reimbursement for fax/phone expense. Candidate Name Jina J Scheele	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	45.00
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) AT&T Mobility Mailing Address P.O. Box 6463 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Monthly fax/phone expense. Candidate Name	Transaction ID: B313957A Date of Disbursement 12 / 04 / 2009 Amount of Each Disbursement this Period 8.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Verizon Mailing Address P.O. Box 660720 City Dallas State TX Zip Code 75266 Purpose of Disbursement Monthly fax/phone expense. Candidate Name	Transaction ID: B313957B Date of Disbursement 12 / 04 / 2009 Amount of Each Disbursement this Period 7.00

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) J. Scheele Mailing Address P.O. Box 19224 City Washington State DC Zip Code 20036 Purpose of Disbursement Reimbursement for internet expense Candidate Name Jina J Scheele	Transaction ID: B313958 Date of Disbursement 12 / 04 / 2009 Amount of Each Disbursement this Period 20.00

SUBTOTAL of Disbursements This Page (optional)	20.00
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 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)
ComCast

Transaction ID: B313958A
Date of Disbursement

Mailing Address P.O. Box 3005

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	9

City State Zip Code
Southeastern PA 19398

Amount of Each Disbursement this Period

Purpose of Disbursement
Monthly internet expense

001
Category/ Type

20.00

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

[MEMO ITEM]

State: District:

Not Applicable

B.

Full Name (Last, First, Middle Initial)
J. Scheele

Transaction ID: B313959
Date of Disbursement

Mailing Address P.O. Box 19224

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	9

City State Zip Code
Washington DC 20036

Amount of Each Disbursement this Period

Purpose of Disbursement
Reimbursement for utilities expenses

001
Category/ Type

30.00

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

C.

Full Name (Last, First, Middle Initial)
PEPCO

Transaction ID: B313959A
Date of Disbursement

Mailing Address 701 9th Street NW

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	4		2	0	0	9

City State Zip Code
Washington DC 20068

Amount of Each Disbursement this Period

Purpose of Disbursement
Monthly utilities expenses

001
Category/ Type

30.00

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Not Applicable

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

30.00

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

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**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: B313961 Date of Disbursement 12 / 24 / 2009
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	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: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

B.	Full Name (Last, First, Middle Initial) Lyris Technologies	Transaction ID: B272518 Date of Disbursement 07 / 02 / 2009
	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: 2009 <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: B272525 Date of Disbursement 07 / 31 / 2009
	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: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	1746.08
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)

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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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Lyris Technologies</p> <p>Mailing Address 1202 Potomac St.</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Website maintenance.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Not Applicable</p>	<p>Transaction ID: B294800</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lyris Technologies</p> <p>Mailing Address 1202 Potomac St.</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Website maintenance.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Not Applicable</p>	<p>Transaction ID: B296520</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Lyris Technologies</p> <p>Mailing Address 1202 Potomac St.</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Website maintenance.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Not Applicable</p>	<p>Transaction ID: B299535</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

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)

<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

<p>A. Full Name (Last, First, Middle Initial) Lyris Technologies</p> <p>Mailing Address 1202 Potomac St.</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Website maintenance. Candidate Name <input type="text"/> Category/Type <input type="text" value="001"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B313947 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>200.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	2		2	0	0	9	200.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		0	2		2	0	0	9													
200.00																						
<p>B. Full Name (Last, First, Middle Initial) Lyris Technologies</p> <p>Mailing Address 1202 Potomac St.</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Website maintenance. Candidate Name <input type="text"/> Category/Type <input type="text" value="001"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B313949 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>3</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>200.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		3	1		2	0	0	9	200.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		3	1		2	0	0	9													
200.00																						
<p>C. Full Name (Last, First, Middle Initial) Taking Action for Animals Conf.</p> <p>Mailing Address 2100 L Street NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Conference registration. Candidate Name <input type="text"/> Category/Type <input type="text" value="001"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B272524 Date of Disbursement <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1"> <tr> <td>145.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	2		2	0	0	9	145.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	7		2	2		2	0	0	9													
145.00																						

SUBTOTAL of Disbursements This Page (optional)	545.00
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) Bank of America	Transaction ID: B272526 Date of Disbursement
	Mailing Address PO Box 25118	<input type="text" value="07"/> <input type="text" value="01"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Tampa State FL Zip Code 33622	Amount of Each Disbursement this Period
	Purpose of Disbursement July BankCard merchant fees Candidate Name	<input type="text" value="46.10"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	001 Category/Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B272528 Date of Disbursement
	Mailing Address PO Box 25118	<input type="text" value="07"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Tampa State FL Zip Code 33622	Amount of Each Disbursement this Period
	Purpose of Disbursement July American Express fees Candidate Name	<input type="text" value="4.95"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	001 Category/Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B272527 Date of Disbursement
	Mailing Address PO Box 25118	<input type="text" value="07"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Tampa State FL Zip Code 33622	Amount of Each Disbursement this Period
	Purpose of Disbursement July American Express fees Candidate Name	<input type="text" value="14.56"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	001 Category/Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="65.61"/>
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 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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement August BankCard merchant fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B292536</p> <p>Date of Disbursement 08 / 03 / 2009</p> <p>Amount of Each Disbursement this Period 45.22</p> <p>001 Category/Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement August 2009 bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B292538</p> <p>Date of Disbursement 08 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 4.95</p> <p>001 Category/Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement August 2009 bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B292539</p> <p>Date of Disbursement 08 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 14.56</p> <p>001 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

64.73

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 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) Bank of America	Transaction ID: B294797 Date of Disbursement 09 / 01 / 2009
	Mailing Address P.O. Box 25118	Amount of Each Disbursement this Period 237.71
	City Tampa State FL Zip Code 33622	
	Purpose of Disbursement September BankCard merchant fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B294794 Date of Disbursement 09 / 08 / 2009
	Mailing Address PO Box 25118	Amount of Each Disbursement this Period 4.95
	City Tampa State FL Zip Code 33622	
	Purpose of Disbursement September 2009 bank charge	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B294795 Date of Disbursement 09 / 11 / 2009
	Mailing Address PO Box 25118	Amount of Each Disbursement this Period 14.56
	City Tampa State FL Zip Code 33622	
	Purpose of Disbursement September 2009 bank charge	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional) ▶

257.22

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 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) Bank of America	Transaction ID: B296527 Date of Disbursement 10 / 01 / 2009
	Mailing Address PO Box 25118	Amount of Each Disbursement this Period 46.48
	City Tampa State FL Zip Code 33622	
	Purpose of Disbursement October BankCard merchant fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B296528 Date of Disbursement 10 / 07 / 2009
	Mailing Address PO Box 25118	Amount of Each Disbursement this Period 4.95
	City Tampa State FL Zip Code 33622	
	Purpose of Disbursement October 2009 bank charge	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B296530 Date of Disbursement 10 / 08 / 2009
	Mailing Address P.O. Box 25118	Amount of Each Disbursement this Period 142.00
	City Tampa State FL Zip Code 33622	
	Purpose of Disbursement Check order/printing charges	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional) ▶

193.43

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 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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement October 2009 bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B296529</p> <p>Date of Disbursement 10 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 14.56</p> <p>001 Category/ Type</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement November 2009 BankCard merchant fees.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B299542</p> <p>Date of Disbursement 11 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 45.70</p> <p>001 Category/ Type</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement November 2009 bank charge.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p>Transaction ID: B299543</p> <p>Date of Disbursement 11 / 09 / 2009</p> <p>Amount of Each Disbursement this Period 4.95</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

65.21

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 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) Bank of America Mailing Address PO Box 25118 City Tampa State FL Zip Code 33622 Purpose of Disbursement November 2009 bank charge. Candidate Name	Transaction ID: B299544 Date of Disbursement 11 / 12 / 2009
	Amount of Each Disbursement this Period 14.56
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

B. Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 25118 City Tampa State FL Zip Code 33622 Purpose of Disbursement December 2009 bank card charge Candidate Name	Transaction ID: B313939 Date of Disbursement 12 / 01 / 2009
	Amount of Each Disbursement this Period 45.58
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

C. Full Name (Last, First, Middle Initial) Bank of America Mailing Address PO Box 25118 City Tampa State FL Zip Code 33622 Purpose of Disbursement December 2009 bank charge Candidate Name	Transaction ID: B313943 Date of Disbursement 12 / 08 / 2009
	Amount of Each Disbursement this Period 4.95
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	65.09
TOTAL This Period (last page this line number only) ▶	(Empty box)

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)
Bank of America

Mailing Address PO Box 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement
December 2009 bank charge

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: FL District:

Not Applicable

Transaction ID: B313944
Date of Disbursement

12 / 11 / 2009

Amount of Each Disbursement this Period

14.56

B.

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

Mailing Address 1020 North Fairfax St. 5th Floor

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
PAC reporting and administration.

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: VA District:

Not Applicable

Transaction ID: B299540
Date of Disbursement

11 / 25 / 2009

Amount of Each Disbursement this Period

4428.83

SUBTOTAL of Disbursements This Page (optional)

4443.39

TOTAL This Period (last page this line number only)

16597.24

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)
Ken Calvert for Congress

Transaction ID: B294061
Date of Disbursement

Mailing Address PO Box 20123

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

City Riverside State CA Zip Code 92516

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Ken Calvert

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 44

B.

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

Transaction ID: B294060
Date of Disbursement

Mailing Address 6520 Village Parkway Second Floor

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	0	9

City Dublin State CA Zip Code 94568

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Jerry McNerney

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District: 11

C.

Full Name (Last, First, Middle Initial)
Friends of Barbara Boxer

Transaction ID: B299546
Date of Disbursement

Mailing Address PO Box 411176

M	M	/	D	D	/	Y	Y	Y	Y
1	2		0	9		2	0	0	9

City Los Angeles State CA Zip Code 90041

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution

011
Category/
Type

Candidate Name
Barbara Boxer

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: CA District:

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

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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) Campbell for Congress	Transaction ID: B299545 Date of Disbursement																			
	Mailing Address 4590 Macarthur Boulevard Suite 500	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	9		2	0	0	9												
	City Newport Beach State CA Zip Code 92660	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name John B Campbell, III	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 48	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) Barbara Lee for Congress	Transaction ID: B299548 Date of Disbursement																			
	Mailing Address 1736 Franklin Street #550	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	5		2	0	0	9												
	City Oakland State CA Zip Code 94612	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Barbara Lee	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	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) Courtney for Congress	Transaction ID: B291702 Date of Disbursement																			
	Mailing Address 38 Risley Road	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	9												
	City Vernon State CT Zip Code 06066	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name Joseph Courtney	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00
2500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

**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) Democratic Senatorial Campaign Committee	Transaction ID: B293011 Date of Disbursement
	Mailing Address 120 Maryland Avenue NE	<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="5000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

B.	Full Name (Last, First, Middle Initial) Castle Campaign Fund	Transaction ID: B295405 Date of Disbursement
	Mailing Address P.O. Box 133	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City Wilmington State DE Zip Code 19899	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Michael Castle	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: DE District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special Primary	

C.	Full Name (Last, First, Middle Initial) Dan 10	Transaction ID: B271778 Date of Disbursement
	Mailing Address 1088 Bishop Street Suite 1009	<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City Honolulu State HI Zip Code 96813	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Daniel K Inouye	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: HI District:	<input type="text" value="011"/> Category/ Type
	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="7000.00"/>
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) Progressive Choices PAC	Transaction ID: B271781 Date of Disbursement 08 / 04 / 2009
	Mailing Address P.O. Box 58	Amount of Each Disbursement this Period 1000.00
	City Evanston State IL Zip Code 60204	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Rodney Alexander for Congress	Transaction ID: B299550 Date of Disbursement 12 / 17 / 2009
	Mailing Address 319 Nancy's Road	Amount of Each Disbursement this Period 500.00
	City Quitman State LA Zip Code 71268	
	Purpose of Disbursement Contribution Candidate Name Rodney Alexander	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) David Vitter for US Senate	Transaction ID: B299552 Date of Disbursement 12 / 17 / 2009
	Mailing Address PO Box 8175	Amount of Each Disbursement this Period 3000.00
	City Metairie State LA Zip Code 70011	
	Purpose of Disbursement Contribution Candidate Name David Vitter	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

<p>A. Full Name (Last, First, Middle Initial) Schauer for Congress</p> <p>Mailing Address PO Box 100</p> <p>City Battle Creek State MI Zip Code 49016</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Mark H Schauer</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: MI District: 07</p>	<p>Transaction ID: B293009 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td>/</td><td>1</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	6	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	1	6	/	2	0	0	9													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) Schauer for Congress</p> <p>Mailing Address PO Box 100</p> <p>City Battle Creek State MI Zip Code 49016</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Mark H Schauer</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: MI District: 07</p>	<p>Transaction ID: B299549 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	5	/	2	0	0	9	500.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	5	/	2	0	0	9													
500.00																						
<p>C. Full Name (Last, First, Middle Initial) McCotter Congressional Committee</p> <p>Mailing Address PO Box 530788</p> <p>City Livonia State MI Zip Code 48153</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name Thaddeus McCotter</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: MI District: 11</p>	<p>Transaction ID: B299551 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	7	/	2	0	0	9	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	2	/	1	7	/	2	0	0	9													
1000.00																						

SUBTOTAL of Disbursements This Page (optional)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;">2500.00</td></tr></table>	2500.00
2500.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td style="text-align: center;"> </td></tr></table>	

**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) Frank LoBiondo for Congress	Transaction ID: B292527 Date of Disbursement 09 / 23 / 2009
	Mailing Address PO Box 775	Amount of Each Disbursement this Period 1000.00
	City Marmora State NJ Zip Code 08223	
	Purpose of Disbursement Contribution Candidate Name Frank A LoBiondo	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Dina Titus for Congress	Transaction ID: B296298 Date of Disbursement 11 / 18 / 2009
	Mailing Address P. O. Box 50614 Suite C5	Amount of Each Disbursement this Period 500.00
	City Henderson State NV Zip Code 89016	
	Purpose of Disbursement Contribution Candidate Name Dina Titus	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	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 Dan Maffei	Transaction ID: B294062 Date of Disbursement 10 / 09 / 2009
	Mailing Address PO Box 74	Amount of Each Disbursement this Period 500.00
	City Syracuse State NY Zip Code 13214	
	Purpose of Disbursement Contribution Candidate Name Dan Maffei	011 Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2000.00
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)
Friends of Maurice Hinchey

Mailing Address PO Box 4497

City Kingston State NY Zip Code 12402

Purpose of Disbursement
Contribution

Candidate Name
Maurice Hinchey

Office Sought: House
 Senate
 President

State: NY District: 22

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B296297

Date of Disbursement

10 / 28 / 2009

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

B.

Full Name (Last, First, Middle Initial)
Friends of Schumer

Mailing Address 509 Madison Ave Suite 1902

City New York State NY Zip Code 10022

Purpose of Disbursement
Contribution

Candidate Name
Charles E Schumer

Office Sought: House
 Senate
 President

State: NY District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B296296

Date of Disbursement

10 / 28 / 2009

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

C.

Full Name (Last, First, Middle Initial)
Gillibrand for Senate

Mailing Address P.O. Box 15734

City Washington State DC Zip Code 20003

Purpose of Disbursement
Contribution

Candidate Name
Kirsten Gillibrand

Office Sought: House
 Senate
 President

State: NY District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Special Primary

Transaction ID: B296299

Date of Disbursement

11 / 18 / 2009

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

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)

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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) Committee for A Livable Future	Transaction ID: B271780 Date of Disbursement
	Mailing Address 921 SW Washington #470	<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City Portland State OR Zip Code 97205	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	<input type="text" value="011"/> Category/Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

B.	Full Name (Last, First, Middle Initial) Henry E. Brown for Congress	Transaction ID: B271779 Date of Disbursement
	Mailing Address P.O. Box 61886	<input type="text" value="08"/> / <input type="text" value="04"/> / <input type="text" value="2009"/>
	City North Charleston State SC Zip Code 29419	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Henry E Brown, Jr.	<input type="text" value="1000.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01	<input type="text" value="011"/> Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Henry E. Brown for Congress	Transaction ID: B292528 Date of Disbursement
	Mailing Address P.O. Box 61886	<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2009"/>
	City North Charleston State SC Zip Code 29419	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution Candidate Name Henry E Brown, Jr.	<input type="text" value="500.00"/>
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 01	<input type="text" value="011"/> Category/Type
	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="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)
Leahy for U.S. Senate

Mailing Address PO Box 1042

City Montpelier State VT Zip Code 05601

Purpose of Disbursement
Contribution

Candidate Name
Patrick J Leahy

Office Sought: House
 Senate
 President

State: VT District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B299547

Date of Disbursement

12 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

B.

Full Name (Last, First, Middle Initial)
People for Patty Murray

Mailing Address PO Box 3662

City Seattle State WA Zip Code 98124

Purpose of Disbursement
Contribution

Candidate Name
Patty Murray

Office Sought: House
 Senate
 President

State: WA District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: B291700

Date of Disbursement

09 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

011
Category/
Type

C.

Full Name (Last, First, Middle Initial)
Nat'l Org. to Retain the Majority (NORM PAC)

Mailing Address 603 Stewart Street #819

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President

State: WA District:

Disbursement For: 2009
 Primary General
 Other (specify) ▼

Not Applicable

Transaction ID: B293010

Date of Disbursement

09 / 29 / 2009

Amount of Each Disbursement this Period

2000.00

011
Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

30500.00

**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 58 / 58

<input 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 checked="" 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)
Senfronia Thompson Campaign Cmte

Mailing Address 7611 Sterlingshire Drive

City Houston State TX Zip Code 77016

Purpose of Disbursement
P-2010 State House 141 TX

Candidate Name
Senfronia Thompson

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: B295406

Date of Disbursement

11 / 05 / 2009

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

250.00