

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 11 28 2006 through 12 31 2006

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 01 29 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
HumaneUSA Federal PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		50535.00
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	18027.87									
(c) Total Receipts (from Line 19)	13480.52	142689.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	31508.39	193224.29								
7. Total Disbursements (from Line 31)	12909.43	174625.33								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	18598.96	18598.96								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
HumaneUSA Federal PAC

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	10825.00	125825.00
(i) Itemized (use Schedule A)	2653.50	16820.75
(ii) Unitemized	13478.50	142645.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	13478.50	142645.75
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	1.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	2.02	42.54
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))	13480.52	142689.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	13480.52	142689.29

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	9490.17	76019.02
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	9490.17	76019.02
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	500.00	87287.05
24. Independent Expenditure (use Schedule E)	2919.26	2919.26
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	8400.00
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))..	12909.43	174625.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	12909.43	174625.33

DETAILED SUMMARY PAGE
of Disbursements

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)	13478.50	142645.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	13478.50	142645.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9490.17	76019.02
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	1.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9490.17	76018.02

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 19
	<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

Full Name (Last, First, Middle Initial) A. CAROLE BASKIN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
Mailing Address P.O. BOX 340189		Transaction ID: A2006-2045869	
City TAMPA	State FL	Zip Code 33694	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C			
Name of Employer HumaneUSA	Occupation SELF		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) B. AMY DUBMAN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
Mailing Address 2332 MILLPARK DRIVE		Transaction ID: A2006-2045866	
City MARYLAND HEIGHTS	State MO	Zip Code 63043	Amount of Each Receipt this Period 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer CAROL HOUSE FURNITURE	Occupation PRESIDENT		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4500.00		

Full Name (Last, First, Middle Initial) C. MR. MARK EISNER, JR.		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 6	
Mailing Address 1203 DREAMS LANDING WAY		Transaction ID: A2006-2045830	
City ANNAPOLIS	State MD	Zip Code 21401	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

SUBTOTAL of Receipts This Page (optional) ▶	5100.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 19
	<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)
MS. LAURA TOLLER GARDNER

Mailing Address 1163 LAURIE AVE.

City State Zip Code
SAN JOSE CA 95125

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

Name of Employer Occupation
Wilbur Properties COMMERCIAL REAL ESTATE

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045829

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
CARYN GINSBERG

Mailing Address 1402 N. LINCON STREET

City State Zip Code
ARLINGTON VA 22201

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

Name of Employer Occupation
INFORMATION REQUESTED CONSULTANT

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045867

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
ROBERT W HULL

Mailing Address 9648 OLD BONHOMME

City State Zip Code
ST. LOUIS MO 63132

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

Name of Employer Occupation
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045865

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)	▶	1600.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 19
	<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)
JOANN LAMP

Mailing Address 911 JULIET LANE

City State Zip Code
ARNOLD MD 21012

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045864

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
MS. INGRID E NEWKIRK

Mailing Address 501 FRONT STREET

City State Zip Code
NORFOLK VA 23510

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

Name of Employer Occupation
PETA FOUNDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045828

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JUDITH L NEY

Mailing Address 570 PARK AVENUE APT. 8C

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Occupation
HumaneUSA INFORMATION REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045873

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	1400.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 19
	<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)
MR. DAVID REUBEN

Mailing Address 10401 GROSVENOR PLACE # G-17

City State Zip Code
ROCKVILLE MD 20852

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 900.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045832

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
MR. SID SHAPIRO

Mailing Address 10957 ELDERWOOD LANE

City State Zip Code
SAN DIEGO CA 92131

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

Name of Employer INFORMATION REQUESTED Occupation ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045824

Amount of Each Receipt this Period
250.00

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

Mailing Address 60498 ARNOLD MARKET

City State Zip Code
BEND OR 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 ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045868

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 19
	<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)
MS. DEBORAH UHLMAN

Mailing Address 161 E. CHICAGO AVE APT 27F

City State Zip Code
CHICAGO IL 60611

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

Name of Employer SELF Occupation REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045821

Amount of Each Receipt this Period
125.00

B. Full Name (Last, First, Middle Initial)
JAMES R VANCE

Mailing Address 17 DATEPALM

City State Zip Code
IRVINE CA 92618

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

Name of Employer INFORMATION REQUESTED Occupation SOFTWARE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 8 / 2 0 0 6

Transaction ID: A2006-2045853

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
MS. ANNE S WILSON

Mailing Address 660 OLD DUNSTABLE ROAD

City State Zip Code
GROTON MA 01450

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 1 5 / 2 0 0 6

Transaction ID: A2006-2045823

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶ **575.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 19
	(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

Full Name (Last, First, Middle Initial) A. ELEANORA M WORTH		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 6	
Mailing Address 2101 FOREST HILL RD.		Transaction ID: A2006-2045844	
City ALEXANDRIA	State VA	Zip Code 22307	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

Full Name (Last, First, Middle Initial) B. MARION ZOLA		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 8 / 2 0 0 6	
Mailing Address 1160 MARILYN DR.		Transaction ID: A2006-2045850	
City BEVERLY HILLS	State CA	Zip Code 90210	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer HumaneUSA	Occupation INFORMATION REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	1200.00
TOTAL This Period (last page this line number only) ▶	10825.00

**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 12 / 19

<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

Full Name (Last, First, Middle Initial) A. Bank of America		Transaction ID: B162155 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 75.17
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/ Type 001

Full Name (Last, First, Middle Initial) B. Bank of America		Transaction ID: B162156 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 5.00
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/ Type 001

Full Name (Last, First, Middle Initial) C. J. Scheele		Transaction ID: B162132 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6
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	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <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) ▶	1426.25
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 13 / 19

<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. Verizon Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 17464 City Tucson State AZ Zip Code 85731 Purpose of Disbursement Cell phone Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B162133 Date of Disbursement 12 / 15 / 2006 Amount of Each Disbursement this Period 102.00 001 Category/Type
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B. Kuzins & Company Full Name (Last, First, Middle Initial) Mailing Address 926 J Street Suite 1218 City Sacramento State CA Zip Code 95814 Purpose of Disbursement In-house mailing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B162134 Date of Disbursement 12 / 20 / 2006 Amount of Each Disbursement this Period 6855.76 001 Category/Type
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C. Big Cat Rescue Full Name (Last, First, Middle Initial) Mailing Address 12802 Easy Street City Tampa State FL Zip Code 33625 Purpose of Disbursement Advertising Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B162140 Date of Disbursement 12 / 20 / 2006 Amount of Each Disbursement this Period 474.50 001 Category/Type
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SUBTOTAL of Disbursements This Page (optional) ▶	7432.26
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)

PAGE 14 / 19

<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

Full Name (Last, First, Middle Initial) A. Lyris Technologies		Transaction ID: B162141 Date of Disbursement 12 / 20 / 2006	
Mailing Address 1202 Potomac St.		Amount of Each Disbursement this Period 400.00	
City Washington State DC Zip Code 20007	Purpose of Disbursement Website maintenance Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) B. J. Scheele		Transaction ID: B162142 Date of Disbursement 12 / 20 / 2006	
Mailing Address P.O. Box 19224		Amount of Each Disbursement this Period 131.66	
City Washington State DC Zip Code 20036	Purpose of Disbursement Reimburse for supplies 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: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) C. Danielle Savage		Transaction ID: B162146 Date of Disbursement 12 / 20 / 2006	
Mailing Address 940 Azalea Dr.		Amount of Each Disbursement this Period 100.00	
City Pomona State CA Zip Code 91766	Purpose of Disbursement Reimburse for supplies Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

SUBTOTAL of Disbursements This Page (optional) ▶	631.66
TOTAL This Period (last page this line number only) ▶	9490.17

**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 15 / 19

<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

Full Name (Last, First, Middle Initial)

A. Perlmutter for Congress

Mailing Address 3440 Youngfield St. Suite 264

City State Zip Code
Wheat Ridge CO 80033

Purpose of Disbursement
O-2006 U.S. House 7 CO

Candidate Name
Ed Perlmutter

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: CO District: 7

Debt Ret General

Transaction ID: B155231

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

500.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) HumaneUSA Federal PAC	FEC IDENTIFICATION NUMBER C C00350439
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Kuzins & Kumpany

Mailing Address
1512 14th Street

City State Zip Code
Sacramento CA 95814

Purpose of Expenditure Category/Type
Printing 004

Name of Federal Candidate supported or Opposed by expenditure:
Ed Whitfield

Calendar Year-To-Date Per Election for Office Sought 531.50

Full Name (Last, First, Middle, Initial) of Payee
Kuzins & Kumpany

Mailing Address
1512 14th Street

City State Zip Code
Sacramento CA 95814

Purpose of Expenditure Category/Type
Postage 004

Name of Federal Candidate supported or Opposed by expenditure:
Ed Whitfield

Calendar Year-To-Date Per Election for Office Sought 1129.78

Date
MM / DD / YYYY
12 / 20 / 2006

Amount
531.50

Transaction ID: B162135

Office Sought: House State: KY
 Senate District: 1
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

NOTE: This is pymt for memo entries on Post-General Rpt; thus no increase to the aggregate y-t-d

Date
MM / DD / YYYY
12 / 20 / 2006

Amount
598.28

Transaction ID: B162136

Office Sought: House State: KY
 Senate District: 1
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

NOTE: This is pymt for memo entries on Post-General Rpt; thus no change to the aggregate y-t-d

(a) SUBTOTAL of Itemized Independent Expenditures	1129.78
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

J Scheele
Signature

Date
MM / DD / YYYY
10 / 26 / 2006

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) HumaneUSA Federal PAC	FEC IDENTIFICATION NUMBER ▼ C C00350439
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Kuzins & Kumpany

Mailing Address
1512 14th Street

City Sacramento	State CA	Zip Code 95814
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Purpose of Expenditure Mailing	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
Ed Whitfield

Calendar Year-To-Date Per Election for Office Sought	1394.26
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Full Name (Last, First, Middle, Initial) of Payee
Kuzins & Kumpany

Mailing Address
1512 14th Street

City Sacramento	State CA	Zip Code 95814
--------------------	-------------	-------------------

Purpose of Expenditure List Rental	Category/ Type 004
---------------------------------------	---

Name of Federal Candidate supported or Opposed by expenditure:
Ed Whitfield

Calendar Year-To-Date Per Election for Office Sought	2169.26
---	---

Date

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 6

Amount
264.48

Transaction ID: B162137

Office Sought: House State: KY
 Senate District: 1
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

NOTE: On 24-hr rpt, Trans ID was 3021; Orig. estimate was \$150.-
 00; This is actual pymt

Date

M M / D D / Y Y Y Y
1 2 / 2 0 / 2 0 0 6

Amount
775.00

Transaction ID: B162138

Office Sought: House State: KY
 Senate District: 1
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2006
 Other (specify) : _____

NOTE: On 24-hr rpt, Trans ID was 3022; Orig. estimate was \$475.-
 00; This is actual pymt

(a) SUBTOTAL of Itemized Independent Expenditures	1039.48
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

J Scheele

 Signature

Date

M M / D D / Y Y Y Y
1 0 / 2 6 / 2 0 0 6

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) HumaneUSA Federal PAC		FEC IDENTIFICATION NUMBER C C00350439
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee Kuzins & Kumpany		Date M M / D D / Y Y Y Y 1 2 / 2 0 / 2 0 0 6
Mailing Address 1512 14th Street		Amount 750.00
City State Zip Code Sacramento CA 95814		Transaction ID: B162139
Purpose of Expenditure Mailhouse Fee		Office Sought: <input checked="" type="checkbox"/> House State: KY <input type="checkbox"/> Senate District: 1 <input type="checkbox"/> Presidential
Category/Type 004		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Ed Whitfield		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____
Calendar Year-To-Date Per Election for Office Sought		2919.26

NOTE: This is pymt for memo entries on Post-General Rpt; there is no change to the aggregate y-t-d

(a) SUBTOTAL of Itemized Independent Expenditures	750.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	2919.26
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
J Scheele Signature	Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 19 / 19	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
HumaneUSA Federal PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Matt Kuzins & Kumpany	Nature of Debt (Purpose): Mailing House Fees - See Schedule E
Mailing Address 926 J Street #1218	
City State ZIP Code Sacramento CA 95814	

Outstanding Balance Beginning This Period	Transaction ID: SD-30	
2504.78		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
0.00	2504.78	0.00

1) SUBTOTALS This Period This Page (optional).....	0.00
2) TOTALS This Period (last page this line number only).....	0.00
3) TOTALS OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	