

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
Humane Society Legislative Fund Political Action Committee

ADDRESS (number and street) 1255 23rd Street, NW
Suite 455
Washington DC 20037
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00466813 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 Year-End 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 (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 10 / 01 / 2019 through [MM] / [DD] / [YYYY] 10 / 31 / 2019

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Amundson, Sara, J, ,
Type or Print Name of Treasurer

Signature of Treasurer Amundson, Sara, J, , [Electronically Filed] Date [MM] / [DD] / [YYYY] 11 / 11 / 2019

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Humane Society Legislative Fund Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>	<input type="text" value=""/>	<input type="text" value="369321.60"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="424724.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="21000.00"/>	<input type="text" value="175612.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="445724.00"/>	<input type="text" value="544933.60"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="7143.76"/>	<input type="text" value="106353.36"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="438580.24"/>	<input type="text" value="438580.24"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

Humane Society Legislative Fund Political Action Committee

Report Covering the Period: From: 10 / 01 / 2019 To: 10 / 31 / 2019

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).....	21000.00	174700.00
(ii) Unitemized	0.00	598.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	21000.00	175298.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	314.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	21000.00	175612.00
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 Transfers (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)).....▶	21000.00	175612.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	21000.00	175612.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	143.76	1353.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	143.76	1353.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7000.00	103500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	0.00	1500.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	7143.76	106353.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7143.76	106353.36

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	21000.00	175612.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	21000.00	175612.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	143.76	1353.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	143.76	1353.36

**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 OF 11
<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

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)
Humane Society Legislative Fund Political Action Committee

A. Westland, Heidi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 770 Skokie Blvd
 Unit 901
 City Northbrook State IL Zip Code 60062-2361
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BMO Private Bank Occupation (for Individual) Vice President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 21 / 2019
Transaction ID : AC8065848B42C4793928
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Gay, Patricia, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1200 Crystal Dr., Suite 812
 City Arlington State VA Zip Code 22202-4311
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 24 / 2019
Transaction ID : A4A3D03772FAA41EA832
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Greenspon, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 49 Old Farm Rd
 City Darien State CT Zip Code 06820-6119
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2019
Transaction ID : AE2CF5304587B44D6A90
 Amount of Each Receipt this Period 5000.00
 Memo Item

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 7 OF 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Humane Society Legislative Fund Political Action Committee

A. Lowell, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 901 Cima Del Mundo Rd
 City Santa Barbara State CA Zip Code 93108-1670
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Retired Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 28 / 2019
Transaction ID : A185139FFC8C6486082B
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. Atherton, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 840 Powell St Apt 602
 City San Francisco State CA Zip Code 94108-2006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Not Employed Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 30 / 2019
Transaction ID : AB3091AC2633842E0AC8
 Amount of Each Receipt this Period 5000.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	21000.00

**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"/> 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)
Humane Society Legislative Fund Political Action Committee

A. Blackbaud, Inc.

Full Name (Last, First, Middle Initial)

Mailing Address 2000 Daniel Island Dr

City Daniel Island State SC Zip Code 29492-7540

Purpose of Disbursement Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 10 / 31 / 2019

FEC Identification Number: C

Transaction ID : B3014C5FEB

Amount of Each Disbursement this Period: 143.76

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	143.76
TOTAL This Period (last page this line number only).....▶	143.76

**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"/> 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)
Humane Society Legislative Fund Political Action Committee

A. JOSH GOTTHEIMER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 584

M M M	/	D D D	/	Y Y Y Y Y
10		17		2019

City RIDGEWOOD State NJ Zip Code 07451

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00573949
---	-----------

Candidate Name

Gottheimer, Josh, , ,

Category/
Type

Transaction ID : BFC2CB61Cf

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

1000.00

State: NJ District: 05

Memo Item

B. GUY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 23177

M M M	/	D D D	/	Y Y Y Y Y
10		21		2019

City PITTSBURGH State PA Zip Code 15222

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00657833
---	-----------

Candidate Name

Reschenthaler, Guy, L., Rep.,

Category/
Type

Transaction ID : B85268FDA7I

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

1000.00

State: PA District: 14

Memo Item

C. HALEY STEVENS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 33717 WOODWARD AVE
#539

M M M	/	D D D	/	Y Y Y Y Y
10		22		2019

City BIRMINGHAM State MI Zip Code 48009

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00638650
---	-----------

Candidate Name

Stevens, Haley, , Rep.,

Category/
Type

Transaction ID : B425536F25I

Amount of Each Disbursement this Period

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

1000.00

State: MI District: 11

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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"/> 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)
Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial) A. JASON CROW FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 23 / 2019
Mailing Address PO BOX 32145		FEC Identification Number C00637363 Transaction ID : B35E32D137
City AURORA	State CO	Zip Code 80041
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 1000.00
Candidate Name Crow, Jason, , Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO	District: 06	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. NORMA TORRES FOR CONGRESS		Date of Disbursement MM / DD / YYYY 10 / 23 / 2019
Mailing Address 728 W EDNA PLACE		FEC Identification Number C00557652 Transaction ID : B9F25BF1C2
City COVINA	State CA	Zip Code 91722
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 1000.00
Candidate Name Torres, Norma, , Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 35	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. NEVADANS FOR STEVEN HORSFORD		Date of Disbursement MM / DD / YYYY 10 / 29 / 2019
Mailing Address PO BOX 336664		FEC Identification Number C00668228 Transaction ID : B9D3BC60C
City NORTH LAS VEGAS	State NV	Zip Code 89033
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 1000.00
Candidate Name Horsford, Steven, Alexzander, Rep.,		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: 04	<input type="checkbox"/> Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)
Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. STANTON FOR CONGRESS

Mailing Address 4340 E INDIAN SCHOOL ROAD
SUITE 21-518

City PHOENIX State AZ Zip Code 85018

Purpose of Disbursement
Contribution to Committee

Candidate Name
Stanton, Greg, , Rep.,

Office Sought: House Senate President
State: AZ District: 09
Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y
10 / 29 / 2019

FEC Identification Number
C C00657304
Transaction ID : B7CBD2F7EI
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:
Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:
Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y

FEC Identification Number
C
Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	1000.00
TOTAL This Period (last page this line number only).....▶	7000.00