

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 2004 through 09 30 2004

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 Ms. J. Scheele

Signature of Treasurer Electronically Filed by Ms. J. Scheele Date 03 27 2006

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
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	4

	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>4</td></tr></table>	Y	Y	Y	Y	2	0	0	4		127895.10
Y	Y	Y	Y							
2	0	0	4							
(b) Cash on Hand at Beginning of Reporting Period	116616.01									
(c) Total Receipts (from Line 19)	47213.59	108447.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	163829.60	236342.59								
7. Total Disbursements (from Line 31)	96193.27	168706.26								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	67636.33	67636.33								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)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
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	4

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	4

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	38213.00	89046.00
(i) Itemized (use Schedule A)	8965.68	16908.68
(ii) Unitemized	47178.68	105954.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	47178.68	105954.68
12. Transfers From Affiliated/Other Party Committees .....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	.00	2392.74
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.)	34.91	100.07
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	47213.59	108447.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	47213.59	108447.49

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.....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	25729.88	38924.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	25729.88	38924.28
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	37500.00
24. Independent Expenditure (use Schedule E)	58263.39	86631.98
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	.00	.00
29. Other Disbursements.....	2700.00	5650.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share .....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	96193.27	168706.26
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	96193.27	168706.26

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)	47178.68	105954.68
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	47178.68	105954.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	25729.88	38924.28
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	.00	2392.74
38. Net Operating Expenditures (subtract Line 37 from Line 36)	25729.88	36531.54

**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 / 39
	<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)
CLOVA ABRAHAMSON

Mailing Address 3615 EAST MOUNTAIN RD

City BARTLESVILLE State OK Zip Code 74003

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 ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 29 / 2004

Transaction ID: A2004-1501695

Amount of Each Receipt this Period
 250.00

B. Full Name (Last, First, Middle Initial)
MR. ROBERT ANDERLINK

Mailing Address 23602 E. 1ST ST.

City LIBERTY LAKE State WA Zip Code 99019

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 ▼ 275.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 18 / 2004

Transaction ID: A2004-1501689

Amount of Each Receipt this Period
 100.00

C. Full Name (Last, First, Middle Initial)
MS ALLISON BURGESS

Mailing Address 8 TERRYHILL LN.

City ST. LOIUS State MO Zip Code 63131

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 ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 05 / 2004

Transaction ID: A2004-1501697

Amount of Each Receipt this Period
 250.00

SUBTOTAL of Receipts This Page (optional)	600.00
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 / 39
	<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. HARRIET CROSBY		Date of Receipt M M / D D / Y Y Y Y 07 / 23 / 2004
Mailing Address 6515 79TH PLACE		Transaction ID: A2004-1501671
City State Zip Code CABIN JOHN MD 20818	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer SELF EMPLOYED	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. DONALD CUNNIUS		Date of Receipt M M / D D / Y Y Y Y 07 / 28 / 2004
Mailing Address 143 ERIN LANE		Transaction ID: A2004-1501757
City State Zip Code SETAUKET NY 11733	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NORTHROP GRUMMOND	Occupation ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. DONALD CUNNIUS		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2004
Mailing Address 143 ERIN LANE		Transaction ID: A2004-1501734
City State Zip Code SETAUKET NY 11733	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NORTHROP GRUMMOND	Occupation ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	5125.00
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 / 39
	<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)
DONALD CUNNIUS

Mailing Address 143 ERIN LANE

City State Zip Code
SETAUKET NY 11733

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

Name of Employer Occupation
NORTHROP GRUMMOND ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 21 / 2004

Transaction ID: A2004-1501616

Amount of Each Receipt this Period
75.00

B. Full Name (Last, First, Middle Initial)
DEL DONATI

Mailing Address 953 FIFTH AVENUE

City State Zip Code
NEW YORK NY 10021

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

Name of Employer Occupation
INFORMATION REQUESTED 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
07 / 28 / 2004

Transaction ID: A2004-1501678

Amount of Each Receipt this Period
1000.00

C. Full Name (Last, First, Middle Initial)
Geordie Duckler

Mailing Address 5331 SW Macadam Suite 299

City State Zip Code
Portland OR 97239

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

Name of Employer Occupation
HumaneUSA EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2004

Transaction ID: A2004-1501905

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	1375.00
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 / 39
	<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. MARK EISNER

Mailing Address 1203 DREAMS LANDING WAY

City State Zip Code
ANNAPOLIS MD 21401

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 ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2004

Transaction ID: A2004-1501768

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
RORY FREEDMAN

Mailing Address 8 HALL COURT

City State Zip Code
PARK RIDGE NJ 07656

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

Name of Employer INFORMATION REQUESTED Occupation WRITER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 11 / 2004

Transaction ID: A2004-1501792

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
JEFF GALE

Mailing Address 6722 N RAINBOW BLVD

City State Zip Code
LAS VEGAS NV 89131

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

Name of Employer SELF EMPLOYED Occupation PHOTOGRAPHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 29 / 2004

Transaction ID: A2004-1501674

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	5350.00
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 / 39
	<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)
JANE GALE

Mailing Address 6722 N RAINBOW BLVD

City State Zip Code
LAS VEGAS NV 89131

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

Name of Employer Occupation
SELF EMPLOYED PHOTOGRAPHER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2004

Transaction ID: A2004-1501675

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
MS LAURA 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
INFORMATION REQUESTED MARKETING DIRECTOR

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

Date of Receipt
MM / DD / YYYY
09 / 13 / 2004

Transaction ID: A2004-1501766

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
NANCY GROVE

Mailing Address 7 SUNNYMEADE DRIVE

City State Zip Code
ST LOUIS MO 63124

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

Name of Employer Occupation
INFORMATION REQUESTED ATTORNEY

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt
MM / DD / YYYY
08 / 02 / 2004

Transaction ID: A2004-1501688

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	10100.00
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 11 / 39
	<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 GERALYN GULSETH

Mailing Address 110 LAGUNARIA LN.

City ALAMEDA State CA Zip Code 94502

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

Name of Employer INFORMATION REQUESTED Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
09 / 21 / 2004

Transaction ID: A2004-1501745

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
MR. CHRIS HUGHES

Mailing Address 3709 WOODBINE RD.

City SIOUX CITY State IA Zip Code 51106

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 ▼ 300.00

Date of Receipt
09 / 11 / 2004

Transaction ID: A2004-1501715

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
CHRISTOPHER KERR

Mailing Address 134 NEW BETHEL RD

City KEMPTON State PA Zip Code 19529

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 ▼ 2500.00

Date of Receipt
09 / 13 / 2004

Transaction ID: A2004-1501673

Amount of Each Receipt this Period
2500.00

SUBTOTAL of Receipts This Page (optional)	▶	2700.00
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 12 / 39
	<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)
MRS. JOANN LAMP

Mailing Address 911 JULIET LANE

City ARNOLD State MD Zip Code 21012

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

Name of Employer RETIRED Occupation PROFESSOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 13 / 2004

Transaction ID: A2004-1501769

Amount of Each Receipt this Period
 200.00

B. Full Name (Last, First, Middle Initial)
MIA MACDONALD

Mailing Address 75 THIRD PLACE

City BROOKLYN State NY Zip Code 11231

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

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 03 / 2004

Transaction ID: A2004-1501669

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
MS CHERIE MASON

Mailing Address PO BOX 39

City SUNSET State ME Zip Code 04683

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 ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 21 / 2004

Transaction ID: A2004-1501742

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)	▶	800.00
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 13 / 39
	<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)
MS CHERIE MASON

Mailing Address PO BOX 39

City State Zip Code
SUNSET ME 04683

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 ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2004

Transaction ID: A2004-1501771

Amount of Each Receipt this Period
100.00

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

Mailing Address 118 RIVERSIDE DRIVE

City State Zip Code
NEW YORK NY 10024

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

Name of Employer SELF EMPLOYED Occupation HOMEMAKER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2004

Transaction ID: A2004-1501733

Amount of Each Receipt this Period
1000.00

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

Mailing Address 118 RIVERSIDE DRIVE

City State Zip Code
NEW YORK NY 10024

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

Name of Employer SELF EMPLOYED Occupation ARTIST

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 28 / 2004

Transaction ID: A2004-1501677

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional)	▶	2100.00
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 14 / 39
	<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. JAMES MORAN		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 4 / 2 0 0 4	
Mailing Address PO BOX 15889		Transaction ID: A2004-1501793	
City SEATTLE	State WA	Zip Code 98115	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED		Occupation INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. MS RUTH NASH		Date of Receipt M M / D D / Y Y Y Y 0 9 / 1 3 / 2 0 0 4	
Mailing Address 16 CREST RD.		Transaction ID: A2004-1501765	
City BELVEDERE	State CA	Zip Code 94920	Amount of Each Receipt this Period 250.00
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 ▼ 650.00	

Full Name (Last, First, Middle Initial) C. JEANNIE NORDSTROM		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 4	
Mailing Address 2033 FIRST AVE.		Transaction ID: A2004-1501662	
City SEATTLE	State WA	Zip Code 98121	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer YMCA		Occupation COMMUNITY VOLUNTEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional) ▶	5750.00
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 15 / 39
	<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. BEVERLY PAUL		Date of Receipt M M / D D / Y Y Y Y 09 / 23 / 2004	
Mailing Address 2171 BUNKER RIDGE RD S		Transaction ID: A2004-1501698	
City SALEM	State OR	Zip Code 97306	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED		Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. RICHARD PEPPIN		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2004	
Mailing Address 5012 MACON RD.		Transaction ID: A2004-1501672	
City ROCKVILLE	State MD	Zip Code 20852	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED		Occupation LACKY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. ANTHONY RUSSA		Date of Receipt M M / D D / Y Y Y Y 09 / 03 / 2004	
Mailing Address 338 GOLDEN MEADOW PLACE		Transaction ID: A2004-1501763	
City ALAMO	State CA	Zip Code 94507	Amount of Each Receipt this Period 250.00
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 ▼ 250.00	

SUBTOTAL of Receipts This Page (optional) ▶	2250.00
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 16 / 39
	<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 ANN SELNICK

Mailing Address 11049 GAITHER FARM RD.

City State Zip Code
ELLICOTT CITY MD 21042

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

Name of Employer INFORMATION REQUESTED Occupation PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2004

Transaction ID: A2004-1501779

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
MS LOUISE THOMAS

Mailing Address 305 N. MAIN ST.

City State Zip Code
WASHINGTON IL 61571

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 ▼ 308.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 28 / 2004

Transaction ID: A2004-1501654

Amount of Each Receipt this Period
3.00

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

Mailing Address 660 OLD DUNSTABLE

City State Zip Code
GROTON MT 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 ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y
08 / 10 / 2004

Transaction ID: A2004-1501658

Amount of Each Receipt this Period
210.00

SUBTOTAL of Receipts This Page (optional)	▶	413.00
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 17 / 39
	(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)
MRS. ELEANOR WORTH

Mailing Address 2101 FOREST HILL RD.

City State Zip Code
ALEXANDRIA VA 22307

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 ▼
2500.00

Date of Receipt
MM / DD / YYYY
07 / 29 / 2004

Transaction ID: A2004-1501676

Amount of Each Receipt this Period
1500.00

B. Full Name (Last, First, Middle Initial)
MS JEAN ZUKIN

Mailing Address 244 PARK LN.

City State Zip Code
ATHERTON CA 94027

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 ▼
400.00

Date of Receipt
MM / DD / YYYY
07 / 23 / 2004

Transaction ID: A2004-1501758

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)	▶	1650.00
TOTAL This Period (last page this line number only)	▶	38213.00

**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)

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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

Full Name (Last, First, Middle Initial) A. Lyris Technologies		Transaction ID: B110995 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 0 4
Mailing Address 2070 Allston Way Suite 200		Amount of Each Disbursement this Period 200.00
City Berkeley State CA Zip Code 94704	Purpose of Disbursement O-2004 Website CA Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:		Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

Full Name (Last, First, Middle Initial) B. Courtney Dillard		Transaction ID: B110987 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 4
Mailing Address 719 N.W. 17th Avenue		Amount of Each Disbursement this Period 1200.00
City Portland State OR Zip Code 97200	Purpose of Disbursement O-2004 Salary-program director OR Candidate Name Courtney Dillard Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:		Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

Full Name (Last, First, Middle Initial) C. J. Scheele		Transaction ID: B111000 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 8 / 2 0 0 4
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 237.18
City Washington State DC Zip Code 20009	Purpose of Disbursement O-2004 Reimburse office supplies DC Candidate Name J. Scheele Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

SUBTOTAL of Disbursements This Page (optional) ▶	1637.18
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 19 / 39

<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. J. Scheele		Transaction ID: B111004 Date of Disbursement 07 / 30 / 2004
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 238.50
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement O-2004 Reimburse office supplies DC		
Candidate Name J. Scheele		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <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: B111005 Date of Disbursement 07 / 30 / 2004
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1615.36
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement O-2004 Salary-program director DC		
Candidate Name J. Scheele		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) C. Courtney Dillard		Transaction ID: B110988 Date of Disbursement 07 / 30 / 2004
Mailing Address 719 N.W. 17th Avenue		Amount of Each Disbursement this Period 71.57
City Portland State OR Zip Code 97200	001 Category/ Type	
Purpose of Disbursement O-2004 Reimburse office supplies OR		
Candidate Name Courtney Dillard		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional) ▶	1925.43
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. J. Scheele Full Name (Last, First, Middle Initial) Mailing Address 1624 Corcoran Street City Washington State DC Zip Code 20009 Purpose of Disbursement O-2004 Reimburse office supplies DC Candidate Name J. Scheele Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B111003 Date of Disbursement 07 / 30 / 2004 Amount of Each Disbursement this Period 126.01 001 Category/ Type
---	--	---

B. Verizon Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 171220 City Tuscon State AZ Zip Code 85731 Purpose of Disbursement O-2004 Cell phone IL Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B111016 Date of Disbursement 07 / 30 / 2004 Amount of Each Disbursement this Period 51.03 001 Category/ Type
--	--	--

C. Internal Revenue Service Full Name (Last, First, Middle Initial) Mailing Address Internal Revenue Service City Ogden State UT Zip Code 84201 Purpose of Disbursement O-2004 Admin expen-Tax Payment US Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B110992 Date of Disbursement 08 / 13 / 2004 Amount of Each Disbursement this Period 5533.10 001 Category/ Type
--	--	--

SUBTOTAL of Disbursements This Page (optional) ▶

5710.14

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 21 / 39

<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. Lyris Technologies		Transaction ID: B110996 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 4
Mailing Address 2070 Allston Way Suite 200		Amount of Each Disbursement this Period 200.00
City Berkeley State CA Zip Code 94704	Purpose of Disbursement O-2004 Website CA	
Candidate Name		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2004 <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: B111010 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 3 / 2 0 0 4
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.16
City Washington State DC Zip Code 20009	Purpose of Disbursement O-2004 Salary-program director DC	
Candidate Name J. Scheele		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) C. Kuzins & Company		Transaction ID: B111135 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 0 / 2 0 0 4
Mailing Address 926 J Street Suite 1218		Amount of Each Disbursement this Period 6582.48
City Sacramento State CA Zip Code 95814	Purpose of Disbursement O-2004 In-house mailing fundraiser CA	
Candidate Name		001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional) ▶	8128.64
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 22 / 39

<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. Verizon		Transaction ID: B111017 Date of Disbursement 08 / 20 / 2004	
Mailing Address P.O. Box 171220		Amount of Each Disbursement this Period 56.18	
City Tuscon State AZ Zip Code 85731	Purpose of Disbursement O-2004 Cell phone IL Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) B. Apollo Graphics		Transaction ID: B110985 Date of Disbursement 08 / 25 / 2004	
Mailing Address 5104 NE Oregon Street		Amount of Each Disbursement this Period 665.85	
City Portland State OR Zip Code 97213	Purpose of Disbursement O-2004 Printing invites OR Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) C. J. Scheele		Transaction ID: B111011 Date of Disbursement 08 / 27 / 2004	
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.16	
City Washington State DC Zip Code 20009	Purpose of Disbursement O-2004 Salary-program director DC Candidate Name J. Scheele	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

SUBTOTAL of Disbursements This Page (optional) ▶

2068.19

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. USPS Full Name (Last, First, Middle Initial) Mailing Address Post Office City Washington State DC Zip Code 20000 Purpose of Disbursement O-2004 Admin expen-shipping NH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B115844 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 4 Amount of Each Disbursement this Period 53.40 Category/Type 001
--	--	--

B. Dog Nose News Full Name (Last, First, Middle Initial) Mailing Address 2083 NW Johnson Street City Portland State OR Zip Code 97209 Purpose of Disbursement O-2004 Subscription OH Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B110990 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 4 Amount of Each Disbursement this Period 448.00 Category/Type 001
--	--	---

C. Minuteman Press Full Name (Last, First, Middle Initial) Mailing Address 2000 K Street NW City Washington State DC Zip Code 20006 Purpose of Disbursement O-2004 Admin expen-printing DC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District: Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		Transaction ID: B115843 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 4 Amount of Each Disbursement this Period 100.00 Category/Type 001
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SUBTOTAL of Disbursements This Page (optional) ▶	601.40
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

Full Name (Last, First, Middle Initial) A. J. Scheele		Transaction ID: B111012 Date of Disbursement 09 / 10 / 2004	
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.16	
City Washington State DC Zip Code 20009	Purpose of Disbursement O-2004 Salary-program director DC	001 Category/ Type	
Candidate Name J. Scheele	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) B. J. Scheele		Transaction ID: B111013 Date of Disbursement 09 / 10 / 2004	
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 63.27	
City Washington State DC Zip Code 20009	Purpose of Disbursement O-2004 Reimburse office supplies DC	001 Category/ Type	
Candidate Name J. Scheele	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: District:	State: District:		

Full Name (Last, First, Middle Initial) C. Institute for the Animals and Society		Transaction ID: B110991 Date of Disbursement 09 / 10 / 2004	
Mailing Address 3500 Boston Street Suite 325		Amount of Each Disbursement this Period 295.00	
City Baltimore State MD Zip Code 21224	Purpose of Disbursement O-2004 Empty Cage Conference MD	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		
State: MD District:	State: MD District:		

SUBTOTAL of Disbursements This Page (optional) ▶	1704.43
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

Full Name (Last, First, Middle Initial) A. Piper Rudnick		Transaction ID: B110998 Date of Disbursement 09 / 10 / 2004	
Mailing Address 1775 Wiehle Avenue		Amount of Each Disbursement this Period 1415.25	
City Reston State VA Zip Code 20190	Purpose of Disbursement O-2004 Attorney VA	001 Category/ Type	
Candidate Name Piper Rudnick	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: VA District: Not Applicable		

Full Name (Last, First, Middle Initial) B. USPS		Transaction ID: B115854 Date of Disbursement 09 / 10 / 2004	
Mailing Address Washington		Amount of Each Disbursement this Period 10.75	
City Washington State DC Zip Code 20000	Purpose of Disbursement O-2004 Admin expen-shipping NH	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: NH District: Not Applicable		

Full Name (Last, First, Middle Initial) C. Minuteman Press		Transaction ID: B110997 Date of Disbursement 09 / 22 / 2004	
Mailing Address 2000 K Street NW		Amount of Each Disbursement this Period 839.06	
City Washington State DC Zip Code 20006	Purpose of Disbursement O-2004 Letterhead DC	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: DC District: Not Applicable		

SUBTOTAL of Disbursements This Page (optional) ▶	2265.06
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)

<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. J. Scheele		Transaction ID: B111014 Date of Disbursement 09 / 24 / 2004
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.16
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement O-2004 Salary-program director DC		
Candidate Name J. Scheele		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <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: B111015 Date of Disbursement 09 / 24 / 2004
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 76.60
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement O-2004 Packet postage DC		
Candidate Name J. Scheele		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) C. USPS		Transaction ID: B115856 Date of Disbursement 09 / 28 / 2004
Mailing Address Washington		Amount of Each Disbursement this Period 63.85
City Washington State DC Zip Code 20000	001 Category/ Type	
Purpose of Disbursement O-2004 Admin expen-shipping NH		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

SUBTOTAL of Disbursements This Page (optional) ▶	1486.61
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

Full Name (Last, First, Middle Initial) A. Verizon		Transaction ID: B111018 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2004
Mailing Address P.O. Box 171220		Amount of Each Disbursement this Period 51.03
City Tuscon State AZ Zip Code 85731	Purpose of Disbursement O-2004 Cell phone IL Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2004 <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. United Parcel Service		Transaction ID: B115862 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2004
Mailing Address 55 Glenlake Parkway NE		Amount of Each Disbursement this Period 44.00
City Atlanta State GA Zip Code 30328	Purpose of Disbursement O-2004 Admin expen-shipping DC Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2004 <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. United Parcel Service		Transaction ID: B115863 Date of Disbursement M M / D D / Y Y Y Y 09 / 30 / 2004
Mailing Address 55 Glenlake Parkway NE		Amount of Each Disbursement this Period 74.00
City Atlanta State GA Zip Code 30328	Purpose of Disbursement O-2004 Admin expen-shipping DC Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2004 <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) ▶

169.03

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

Full Name (Last, First, Middle Initial)

A. Internal Revenue Service

Mailing Address Internal Revenue Service

City Ogden State UT Zip Code 84201

Purpose of Disbursement
O-2004 Admin expen-Tax Payment US

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2004
 Primary General
 Other (specify) ▼

State: DC District:

Not Applicable

Transaction ID: B110993

Date of Disbursement

09 / 30 / 2004

Amount of Each Disbursement this Period

33.77

SUBTOTAL of Disbursements This Page (optional)

33.77

TOTAL This Period (last page this line number only)

25729.88

**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

Full Name (Last, First, Middle Initial) A. ROMERO FOR CONGRESS		Transaction ID: B111088 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 4
Mailing Address PO Box 527		Amount of Each Disbursement this Period 500.00
City Albuquerque State NM Zip Code 87103	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 01 NM		
Candidate Name Richard Romero		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 01	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. DEFAZIO FOR CONGRESS		Transaction ID: B111084 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 4
Mailing Address PO Box 1316		Amount of Each Disbursement this Period 500.00
City Springfield State OR Zip Code 97477	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 04 OR		
Candidate Name Peter A DeFazio		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 04	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. DAVID VITTER FOR CONGRESS		Transaction ID: B111092 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 4
Mailing Address 238 HELIOS AVENUE		Amount of Each Disbursement this Period 1000.00
City METAIRIE State LA Zip Code 70005	011 Category/ Type	
Purpose of Disbursement P-2004 U.S. Senate LA		
Candidate Name David Vitter		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District:	Disbursement For: 2004 <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) ▶	(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)

<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. PETER DEUTSCH FOR CONGRESS		Transaction ID: B111085 Date of Disbursement M M / D D / Y Y Y Y 08 / 10 / 2004
Mailing Address PO BOX 817689		Amount of Each Disbursement this Period 500.00
City HOLLYWOOD State FL Zip Code 33081	011 Category/ Type	
Purpose of Disbursement P-2004 U.S. House 20 FL		
Candidate Name Peter Deutsch		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20	Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PRICE FOR CONGRESS COMMITTEE		Transaction ID: B111087 Date of Disbursement M M / D D / Y Y Y Y 09 / 03 / 2004
Mailing Address P. O. Box 1986		Amount of Each Disbursement this Period 1000.00
City Raleigh State NC Zip Code 27602	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 04 NC		
Candidate Name David E Price		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 04	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. THOMAS FOR CONGRESS		Transaction ID: B111090 Date of Disbursement M M / D D / Y Y Y Y 09 / 14 / 2004
Mailing Address 13040 W 80TH AVE		Amount of Each Disbursement this Period 2000.00
City ARVADA State CO Zip Code 80005	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 7 CO		
Candidate Name David Thomas		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 7	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
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)

<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. CHRISTOPHER SHAYS FOR CONGRESS		Transaction ID: B111089 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 4
Mailing Address 98 East Avenue Rear Building		Amount of Each Disbursement this Period 1000.00
City Norwalk State CT Zip Code 06851	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 04 CT		
Candidate Name Christopher Shays		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. OBAMA FOR ILLINOIS INC		Transaction ID: B111086 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 4
Mailing Address 5450-1 S EAST VIEW PARK		Amount of Each Disbursement this Period 2000.00
City CHICAGO State IL Zip Code 60615	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. Senate IL		
Candidate Name Barack Obama		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. VAN HOLLEN FOR CONGRESS		Transaction ID: B111091 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 4
Mailing Address 10537 St. Paul Street		Amount of Each Disbursement this Period 1000.00
City Kennington State MD Zip Code 20895	011 Category/ Type	
Purpose of Disbursement G-2004 U.S. House 08 MD		
Candidate Name Chris Van Hollen		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	4000.00
TOTAL This Period (last page this line number only) ▶	9500.00

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)

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<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

Full Name (Last, First, Middle Initial) A. Friends of Peter Courtney		Transaction ID: B115837 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 4
Mailing Address 2925 Island View Drive N.		Amount of Each Disbursement this Period 500.00
City Salem State OR Zip Code 97303	Purpose of Disbursement G-2004 State Senate 11 OR Candidate Name Peter Courtney Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 11	
Category/Type 011		
Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Ryan Deckert		Transaction ID: B111105 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 9 / 2 0 0 4
Mailing Address PO Box 2247		Amount of Each Disbursement this Period 500.00
City Beaverton State OR Zip Code 97005	Purpose of Disbursement G-2004 State Senate 14 OR Candidate Name Ryan Deckert Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 14	
Category/Type 011		
Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Friends of Paul LaFlamme		Transaction ID: B115842 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 4
Mailing Address PO Box 6101		Amount of Each Disbursement this Period 500.00
City Nashua State NH Zip Code 03063	Purpose of Disbursement P-2004 State Senate 12 NH Candidate Name Paul LaFlamme Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NH District: 12	
Category/Type 011		
Disbursement For: 2004 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
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 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

Full Name (Last, First, Middle Initial) A. Katy Hubener		Transaction ID: B111103 Date of Disbursement 08 / 31 / 2004
Mailing Address 217 W. Main street		Amount of Each Disbursement this Period 250.00
City Grand Praire	State TX	
Zip Code 75050		
Purpose of Disbursement G-2004 State House 106 TX		
Candidate Name Katy Hubener		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 10		

Full Name (Last, First, Middle Initial) B. Toby Goodman Campaign		Transaction ID: B111101 Date of Disbursement 09 / 01 / 2004
Mailing Address 1600 E Kamar blvd		Amount of Each Disbursement this Period 250.00
City Arlington	State TX	
Zip Code 76011		
Purpose of Disbursement G-2004 State House 93 TX		
Candidate Name Toby Goodman		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 93		

Full Name (Last, First, Middle Initial) C. Jim McReynolds Campaign		Transaction ID: B115845 Date of Disbursement 09 / 01 / 2004
Mailing Address 101-C Temple Blvd.		Amount of Each Disbursement this Period 250.00
City Lufkin	State TX	
Zip Code 75901		
Purpose of Disbursement G-2004 State House 12 TX		
Candidate Name Jim McReynolds		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TX District: 12		

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
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 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

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. Lindley for Representative		Transaction ID: B111104 Date of Disbursement 09 / 30 / 2004
Mailing Address 2595 SW 55th ST		Amount of Each Disbursement this Period 250.00
City Oklahoma City	State OK	
Zip Code 73119		
Purpose of Disbursement G-2004 State House 93 OK		
Candidate Name Al Lindley		011 Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OK District: 93		

Full Name (Last, First, Middle Initial) B. Citizens for Shirley Johnson		Transaction ID: B111102 Date of Disbursement 09 / 30 / 2004
Mailing Address 6525 Aspen Dr		Amount of Each Disbursement this Period 200.00
City Troy	State MI	
Zip Code 48098		
Purpose of Disbursement G-2004 State Senate 13 MI		
Candidate Name Shirley Johnson		011 Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2004 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District: 13		

SUBTOTAL of Disbursements This Page (optional)	450.00
TOTAL This Period (last page this line number only)	2700.00

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
List America

Date
M M / D D / Y Y Y Y
0 7 / 2 1 / 2 0 0 4

Mailing Address
1202 Potomac St.

Amount
399.54

City State Zip Code
Washington DC 20007

Transaction ID: SE24.4963
Office Sought: House State: MI
 Senate District: 7
 Presidential

Purpose of Expenditure
List for 7th Congressional Michigan

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
JOHN SCHWARZ

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
399.54

Disbursement For: Primary General 2004
 Other (specify) : _____

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

Date
M M / D D / Y Y Y Y
0 7 / 2 7 / 2 0 0 4

Mailing Address
926 J Street
#1218

Amount
4209.52

City State Zip Code
Sacramento CA 95814

Transaction ID: SE24.4955
Office Sought: House State: MI
 Senate District: 7
 Presidential

Purpose of Expenditure
Mailing Schwarz

Category/Type
004

Name of Federal Candidate supported or Opposed by expenditure:
JOHN SCHWARZ

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
4609.06

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	4609.06
(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.

Signature _____ Date M M / D D / Y Y Y Y

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
ARFF

Mailing Address
1431 N Federal Highway

City Ft.Lauderdale	State FL	Zip Code 33304
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Purpose of Expenditure Mailing List	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
PETER DEUTSCH

Date
MM / DD / YYYY
08 / 23 / 2004

Amount
225.00

Transaction ID: SE24.4983

Office Sought: House State: FL
 Senate District: 22
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Calendar Year-To-Date Per Election
for Office Sought

225.00

Full Name (Last, First, Middle, Initial) of Payee
Weekly Gambit

Mailing Address
3923 Bienville st

City New Orleans	State LA	Zip Code 70119
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Purpose of Expenditure Advertisement	Category/ Type 004
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Name of Federal Candidate supported or Opposed by expenditure:
CHRIS JOHN

Date
MM / DD / YYYY
09 / 05 / 2004

Amount
2227.00

Transaction ID: SA24.4989

Office Sought: House State: LA
 Senate District: 7
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Calendar Year-To-Date Per Election
for Office Sought

2227.00

(a) SUBTOTAL of Itemized Independent Expenditures	2452.00
(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.

Signature _____ Date MM / DD / YYYY

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
List America

Mailing Address
1202 Potomac St.

City	State	Zip Code
Washington	DC	20007

Purpose of Expenditure Mailing List	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
RICHARD M. ROMERO

Calendar Year-To-Date Per Election for Office Sought	281.00
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Date

M M	/	D D	/	Y Y Y Y
0 9		3 0		2 0 0 4

Amount

281.00

Transaction ID: SE24.5033

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

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
List America

Mailing Address
1202 Potomac St.

City	State	Zip Code
Washington	DC	20007

Purpose of Expenditure Mailing LA Chris John	Category/ Type
	004

Name of Federal Candidate supported or Opposed by expenditure:
CHRIS JOHN

Calendar Year-To-Date Per Election for Office Sought	3148.33
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Date

M M	/	D D	/	Y Y Y Y
0 9		3 0		2 0 0 4

Amount

921.33

Transaction ID: SA24.5037

Office Sought: House State: LA
 Senate District: 7
 Presidential

Check One: Support Oppose

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	1202.33
(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.

Signature _____ Date

M M	/	D D	/	Y Y Y Y

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 Target Media LLC		Date M M / D D / Y Y Y Y 09 / 30 / 2004	
Mailing Address 649 Papworth Avenue Suite 100		Amount 50000.00	
City State Zip Code Metairie LA 70005		Transaction ID: SA24.5029	
Purpose of Expenditure Advertisement		Office Sought: <input checked="" type="checkbox"/> House State: LA <input type="checkbox"/> Senate District: 7 <input type="checkbox"/> Presidential	
Category/Type 003		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: CHRIS JOHN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2004 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought		53148.33	

(a) SUBTOTAL of Itemized Independent Expenditures	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	58263.39
<p>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.</p>	
Signature _____	Date M M / D D / Y Y Y Y _____ / _____ / _____

Image# 26960019611

Form/Schedule: **SA11A1**

As the FEC Reports Analysis Division staff is aware, an external audit was recently performed for the Humane USA Political Action Committee. As a result of the audit findings, the 2004 October Quarterly Report is amended to include unitemized receipts from individuals on Line 11 (a)(ii), which were previously undisclosed.

Transaction ID:

Form/Schedule: **SE24**

This amendment corrects a clerical error on Schedule E (see page 38), changing the \$50,000 Chris John independent expenditure from Support to Oppose. Please update Commission records accordingly.

Transaction ID:
