

# 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 M M M / D D D / Y Y Y Y Y Y in the State of  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 06 / 01 / 2019 through 06 / 30 / 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 07 / 17 / 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"/>		369321.60
(b) Cash on Hand at Beginning of Reporting Period.....	360127.16	
(c) Total Receipts (from Line 19) .....	20550.00	61387.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	380677.16	430708.60
7. Total Disbursements (from Line 31).....	24179.73	74211.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	356497.43	356497.43
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE of Receipts

Write or Type Committee Name

**Humane Society Legislative Fund Political Action Committee**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
06 / 01 / 2019 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 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).....	20500.00	60500.00
(ii) Unitemized .....	50.00	573.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	20550.00	61073.00
(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) .....	20550.00	61387.00
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)).....▶	20550.00	61387.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	20550.00	61387.00

**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 .....	179.73	211.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	179.73	211.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	24000.00	74000.00
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	0.00
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)) ..	24179.73	74211.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24179.73	74211.17

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	20550.00	61387.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20550.00	61387.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	179.73	211.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	179.73	211.17

**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 16
<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. Haber, Daran, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 231 Monmouth Ave  
 City Atlantic Highlands State NJ Zip Code 07716-2205  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Meridian Health Occupation (for Individual) Doctor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 06 / 2019  
**Transaction ID : AAC6E46863691485AACA**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Spivak, Emily, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 163 E Edgewood Dr # 119  
 City Mc Murray State PA Zip Code 15317-3358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Humane Society of the United States Occupation (for Individual) Outreach Manager, O&E  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 07 / 2019  
**Transaction ID : A61D5236D9D6A4BAE837**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**C. Delma, Linda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 Edgewood Rd  
 City Summit State NJ Zip Code 07901-3903  
 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 06 / 12 / 2019  
**Transaction ID : A2BAADAAF457A46C1B1C**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 7 OF 16  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

**A. Head, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 39 Edgewood Rd  
 City Summit State NJ Zip Code 07901-3903  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 12 / 2019**  
**Transaction ID : A74C01BC99DE148D7B9E**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**B. Bernstein, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16300 Jousting Ter  
 City Derwood State MD Zip Code 20855-1654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) U.S. Department of Defense Occupation (for Individual) Oncologist  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **06 / 17 / 2019**  
**Transaction ID : AA3741C7856864DDC947**  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	20500.00

**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**

Full Name (Last, First, Middle Initial)

**A. Blackbaud, Inc.**

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  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2019

FEC Identification Number

C  
Transaction ID : BEA90B6EDF  
Amount of Each Disbursement this Period  
119.68

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wells Fargo**

Mailing Address 215 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1155

Purpose of Disbursement  
Bank Fee

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
06 / 12 / 2019

FEC Identification Number

C  
Transaction ID : B5EE2C2DF6  
Amount of Each Disbursement this Period  
60.05

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  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C  
Amount of Each Disbursement this Period

Memo Item

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

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

179.73  
179.73



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 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. HARLEY ROUDA FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 120 NEWPORT CENTER DR  
#28

City NEWPORT BEACH State CA Zip Code 92660

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Rouda, Harley, E., Rep., Jr.**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 48

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 14 / 2019

FEC Identification Number

**C** C00633982

**Transaction ID : BD4F005F70I**

Amount of Each Disbursement this Period

1000.00

Memo Item

**B. CONOR LAMB FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 10381

City PITTSBURGH State PA Zip Code 15234

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Lamb, Conor, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: PA District: 17

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 14 / 2019

FEC Identification Number

**C** C00657411

**Transaction ID : BC46675BCC**

Amount of Each Disbursement this Period

1000.00

Memo Item

**C. JOSH HARDER FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 4426

City MODESTO State CA Zip Code 95352

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Harder, Josh, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 10

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 / 14 / 2019

FEC Identification Number

**C** C00639146

**Transaction ID : B5E834556A**

Amount of Each Disbursement this Period

1000.00

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. TJ COX FOR CONGRESS**

Mailing Address PO BOX 804

City **SELMA** State **CA** Zip Code **93662**

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Cox, Terrance, John, Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: **CA** District: **21**

Date of Disbursement

/  /

FEC Identification Number

**C** C00648956

**Transaction ID : B4C9F563D8!**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKIE SHERRILL FOR CONGRESS**

Mailing Address P.O. BOX 43032

City **MONTCLAIR** State **NJ** Zip Code **07043**

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Sherrill, Mikie, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: **NJ** District: **11**

Date of Disbursement

/  /

FEC Identification Number

**C** C00640003

**Transaction ID : B97C188F352**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. LAUREN UNDERWOOD FOR CONGRESS**

Mailing Address 2758 US HIGHWAY 34  
SUITE B#149

City **OSWEGO** State **IL** Zip Code **60543**

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Underwood, Lauren, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: **IL** District: **14**

Date of Disbursement

/  /

FEC Identification Number

**C** C00652719

**Transaction ID : B263545293!**  
Amount of Each Disbursement this Period

Memo Item

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input 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. CARTWRIGHT FOR CONGRESS**

Mailing Address PO BOX 1805

City: PLAINS State: PA Zip Code: 18705

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Cartwright, Matthew, A., Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: PA District: 08

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2019

FEC Identification Number

**C** C00509968

**Transaction ID : BFB364C71D**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. TOM MALINOWSKI FOR CONGRESS**

Mailing Address PO BOX 263

City: SOMERVILLE State: NJ Zip Code: 08876

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Malinowski, Tom, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NJ District: 07

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2019

FEC Identification Number

**C** C00656686

**Transaction ID : B23E76850F3**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. KATIE HILL FOR CONGRESS**

Mailing Address 1327 SE TACOMA ST, #247

City: PORTLAND State: OR Zip Code: 97202

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Hill, Katherine, Lauren, Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 25

Date of Disbursement

MM / DD / YYYY  
06 / 14 / 2019

FEC Identification Number

**C** C00634212

**Transaction ID : BE9A58DCB**

Amount of Each Disbursement this Period

1000.00

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**

**A. DELGADO FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 802

M M M	/	D D D	/	Y Y Y Y Y
06		14		2019

City RHINEBECK State NY Zip Code 12572

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00633859
---	-----------

Candidate Name  
**Delgado, Antonio, , Rep.,**

Category/  
Type

Transaction ID : **BD6D3F8EE0**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NY District: 19

1000.00
---------

Memo Item

**B. ANDY KIM FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 211

M M M	/	D D D	/	Y Y Y Y Y
06		14		2019

City MARLTON State NJ Zip Code 08053

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00648220
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Candidate Name  
**Kim, Andy, , Rep.,**

Category/  
Type

Transaction ID : **BBD5AB3DDI**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NJ District: 03

1000.00
---------

Memo Item

**C. BRINDISI FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 165

M M M	/	D D D	/	Y Y Y Y Y
06		14		2019

City UTICA State NY Zip Code 13503

FEC Identification Number

Purpose of Disbursement  
Contribution to Committee

C	C00648725
---	-----------

Candidate Name  
**Brindisi, Anthony, , Rep.,**

Category/  
Type

Transaction ID : **B774FE8850**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: NY District: 22

1000.00
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Memo Item

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

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

3000.00
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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**

**A. CHRIS PAPPAS FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 313

City MANCHESTER State NH Zip Code 03105

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Pappas, Chris, , Rep.,**

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

State: NH District: 01

Date of Disbursement: 06 / 14 / 2019

FEC Identification Number: C00660464  
**Transaction ID : B521BD1CB3**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. TOM O'HALLERAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 20375

City SEDONA State AZ Zip Code 86341

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**O'Halleran, Tom, , Rep.,**

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

State: AZ District: 01

Date of Disbursement: 06 / 14 / 2019

FEC Identification Number: C00582890  
**Transaction ID : BE606C60821**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. CINDY AXNE FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 65551

City WEST DES MOINES State IA Zip Code 50265

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Axne, Cindy, , Rep.,**

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

State: IA District: 03

Date of Disbursement: 06 / 14 / 2019

FEC Identification Number: C00646844  
**Transaction ID : B8AF08DDD,**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 3000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<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. BARBARA LEE FOR CONGRESS**

Mailing Address 449 FIFTEENTH STREET  
SUITE 403

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Lee, Barbara, J., Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 13

Date of Disbursement

MM / DD / YYYY  
06 / 18 / 2019

FEC Identification Number

**C** C00331769  
**Transaction ID : B971DC8DCI**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. CISNEROS FOR CONGRESS**

Mailing Address P.O. BOX 40

City PLACENTIA State CA Zip Code 92871

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Cisneros, Gilbert, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 39

Date of Disbursement

MM / DD / YYYY  
06 / 18 / 2019

FEC Identification Number

**C** C00650648  
**Transaction ID : B62D6184157**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. FRESHMAN FRONTLINE VICTORY FUND**

Mailing Address 918 PENNSYLVANIA AVE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**FRESHMAN FRONTLINE VICTORY FUND**

Office Sought:  House  Senate  President  
Disbursement For: 2019  Primary  General  Other (specify) ▼  
State: District: Other

Date of Disbursement

MM / DD / YYYY  
06 / 18 / 2019

FEC Identification Number

**C** C00707034  
**Transaction ID : B1A6C7429E**  
Amount of Each Disbursement this Period  
500.00

Memo Item

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

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

2500.00

**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. FRIENDS OF DON BEYER**

Mailing Address 1751 POTOMAC GREENS DRIVE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Beyer, Donald, Sternoff, , JR**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: VA District: 08

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2019

FEC Identification Number

C C00555888

Transaction ID : B0DA4653F7  
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PETE KING FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 1428

City SEAFORD State NY Zip Code 11783-0257

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**King, Pete, T., Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify)  
State: NY District: 02

Date of Disbursement

MM / DD / YYYY  
06 / 24 / 2019

FEC Identification Number

C C00272211

Transaction ID : B6B3DA43A5  
Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. PETERS FOR MICHIGAN**

Mailing Address PO BOX 226

City Bloomfield Hills State MI Zip Code 48303-0226

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Peters, Gary, C., Sen.,**

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

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2019

FEC Identification Number

C C00437889

Transaction ID : B2CEC4E01z  
Amount of Each Disbursement this Period

2500.00

Memo Item

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

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

4500.00

**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. KATIE PORTER FOR CONGRESS**

Mailing Address PO BOX 5176

City IRVINE State CA Zip Code 92617

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Porter, Katherine, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 45

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2019

FEC Identification Number

**C** C00636571

**Transaction ID : BF0783407Bf**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE LEVIN FOR CONGRESS**

Mailing Address 555 CAPITOL MALL, SUITE 400

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement  
Contribution to Committee

Candidate Name  
**Levin, Mike, , Rep.,**

Office Sought:  House  Senate  President  
Disbursement For: 2020  Primary  General  Other (specify) ▼  
State: CA District: 49

Date of Disbursement

MM / DD / YYYY  
06 / 27 / 2019

FEC Identification Number

**C** C00634253

**Transaction ID : B169F67F4Af**

Amount of Each Disbursement this Period

1000.00

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  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Memo Item

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

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

2000.00

24000.00