



**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="2022"/>		401632.44
(b) Cash on Hand at Beginning of Reporting Period.....	401632.44	
(c) Total Receipts (from Line 19) .....	17998.00	17998.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	419630.44	419630.44
7. Total Disbursements (from Line 31).....	1812.34	1812.34
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	417818.10	417818.10
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:  /  /  To:  /  /

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).....	17500.00	17500.00
(ii) Unitemized .....	498.00	498.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	17998.00	17998.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	17998.00	17998.00
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)).....▶	17998.00	17998.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	17998.00	17998.00

**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 .....	812.34	812.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	812.34	812.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
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)) ..	1812.34	1812.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1812.34	1812.34

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	17998.00	17998.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17998.00	17998.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	812.34	812.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	812.34	812.34

**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 9
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

**A. Black, Samuel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 930 NW 12th Ave  
 Apt 212  
 City Portland State OR Zip Code 97209-3067  
 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  
 01 / 14 / 2022  
**Transaction ID : A0D78F7CD923D4D0AAE1**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**B. Baskin, Carole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12802 Easy St  
 City Tampa State FL Zip Code 33625-3702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Big Cat Rescue Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 01 / 21 / 2022  
**Transaction ID : ACC24849803684368815**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. Baskin, Howard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 12802 Easy St.  
 City Tampa State FL Zip Code 33625-3702  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Management Consultant  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 01 / 21 / 2022  
**Transaction ID : A446DDF116A284764996**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15000.00
<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: (check only one)	PAGE 7 OF 9
<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)  
**Humane Society Legislative Fund Political Action Committee**

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Farrah, Dennis, , ,

Mailing Address 14829 E. Maplewood Dr

City Centennial	State CO	Zip Code 80016-4704
--------------------	-------------	------------------------

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 ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	31	/	2022

**Transaction ID : A6BBD3E5471BB4B76AF3**

Amount of Each Receipt this Period  
2500.00

Memo Item

**B.** 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  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

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  

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2500.00
<b>TOTAL</b> This Period (last page this line number only).....	17500.00

**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. CitiBank**

Mailing Address 1 Penns Way

City New Castle State DE Zip Code 19720-2408

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  
01 / 10 / 2022

FEC Identification Number

C  
Transaction ID : B10E0092A9  
Amount of Each Disbursement this Period  
85.12

Memo Item

Full Name (Last, First, Middle Initial)

**B. Paragon Payment Solutions**

Mailing Address 2141 E Broadway Rd Ste 202

City Tempe State AZ Zip Code 85282-1895

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  
01 / 11 / 2022

FEC Identification Number

C  
Transaction ID : B7A5B68C3B  
Amount of Each Disbursement this Period  
718.88

Memo Item

Full Name (Last, First, Middle Initial)

**C. Vantiv**

Mailing Address 8500 Governors Hill Dr

City Symmes Twp State OH Zip Code 45249-1384

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  
01 / 31 / 2022

FEC Identification Number

C  
Transaction ID : B49F37A9C1  
Amount of Each Disbursement this Period  
8.34

Memo Item

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

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

812.34  
812.34



# 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. DONALD M PAYNE JR FOR CONGRESS**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
01		09		2022

Mailing Address PO BOX 2406

City  
NEWARK

State  
NJ

Zip Code  
07114

FEC Identification Number

**C** C00519355

**Transaction ID : B4DF6E6BB9**

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement  
Contribution to Committee

Category/Type

Candidate Name

**Payne, Donald, M., Rep., Jr.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: NJ District: 10

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

FEC Identification Number

**C**

Amount of Each Disbursement this Period

Purpose of Disbursement

Category/Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Memo Item

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

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

1000.00

1000.00