

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEC MAIL ROOM
2000 JUL 18 P 1:45

USE FEC MAILING LABEL
OR
TYPE OR PRINT

1. NAME OF COMMITTEE (in full)		
C00350439	060500	P 209
LINDA MARIE NEALON HUNANEUSA POLITICAL ACTION COM MITTEE 23701 HARBOR VISTA DR MALIBU GA 90265		
2. FEC IDENTIFICATION NUMBER		C00350439
3. <input type="checkbox"/> This committee has qualified as a multicandidate committee. (see FEC FORM 1M)		

4. TYPE OF REPORT

- (a) April 15 Quarterly Report
- July 15 Quarterly Report
- October 15 Quarterly Report
- January 31 Year End Report
- July 31 Mid Year Report (Non-election Year Only)
- Termination Report
- Monthly Report Due On:
- | | | |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20 | <input type="checkbox"/> October 20 |
| <input type="checkbox"/> March 20 | <input type="checkbox"/> July 20 | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20 | <input type="checkbox"/> August 20 | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20 | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31 |
- 12-Day Pre-Election Report for the _____
(Type of Election)
election on _____ in the State of _____
- 30-Day Post-Election Report following the General Election
on _____ in the State of _____

(b) Is this Report an Amendment? YES NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>4/01/00</u> through <u>6/30/00</u>		
6. (a) Cash on Hand January 1, 19 <u>00</u>		\$ 37541.94
(b) Cash on Hand at Beginning of Reporting Period	\$ 51,511.94	
(c) Total Receipts (from Line 19)	\$ 11,350.00	\$ 31,320.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 62,861.94	\$ 68,861.94
7. Total Disbursements (from Line 30)	\$ 19,000.00	\$ 19,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	\$ 53,861.94	\$ 53,861.94
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -	For further information contact: Federal Election Commission 969 E Street, NW Washington, DC 20483 Toll Free 800-424-9530 Local 202-694-1100
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	\$ -	
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: LINDA NEALON

Signature of Treasurer: *Linda Nealon* Date: 7/14/00

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

**DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X**

(revised 1/1/81)

NAME OF COMMITTEE	REPORT COVERING PERIOD		
	FROM	TO	
I. Receipts			
	COLUMN A Total This Period	COLUMN B Calendar Year	
11. Contributions (other than loans) From:			
a. Individuals/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	11,350. ⁰⁰	62,861.94	11(a)(i)
ii. Unitemized	-	-	11(a)(ii)
iii. Total (add i and ii) >	11,350. ⁰⁰	62,861.94	11(a)(iii)
b. Political Party Committees	-	-	11(b)
c. Other Political Committees (such as PACs)	-	-	11(c)
d. Total Contributions (add a ii, b and c) >	11,350. ⁰⁰	62,861.94	11(d)
12. Transfers From Affiliated/Other Party Committees	-	-	12
13. All Loans Received	-	-	13
14. Loan Repayments Received	-	-	14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-	-	15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-	-	16
17. Other Federal Receipts (Dividends, Interest, etc.)	-	-	17
18. Transfers from Nonfederal Account for Joint Activity	-	-	18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	11,350. ⁰⁰	62,861.94	19
20. Total Federal Receipts (subtract line 18 from line 19) >	11,350. ⁰⁰	62,861.94	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share	-	-	21(a)(i)
ii. Non-Federal Share	-	-	21(a)(ii)
b. Other Federal Operating Expenditures	-	-	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) >	-	-	21(c)
22. Transfers to Affiliated/Other Party Committees	-	-	22
23. Contributions to Federal Candidates/Committees and Other Political Committees	13,000.	13,000.	23
24. Independent Expenditures (use Schedule E)	-	-	24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	-	-	25
26. Loan Repayments Made	-	-	26
27. Loans Made	-	-	27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees	-	-	28(a)
b. Political Party Committees	-	-	28(b)
c. Other Political Committees (such as PACs)	-	-	28(c)
d. Total Contribution Refunds (add a, b and c) >	-	-	28(d)
29. Other Disbursements	-	-	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	13,000.	13,000.	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) >	13,000.	13,000.	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	11,350. ⁰⁰	62,861.94	32
33. Total Contribution Refunds (from line 28d)	-	-	33
34. Net Contributions (other than loans)(subtract line 33 from 32)	11,350. ⁰⁰	62,861.94	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) >	-	-	35
36. Offsets to Operating Expenditures (from line 15)	-	-	36
37. Net Operating Expenditures (subtract line 36 from 35) >	-	-	37

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER

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 USA PAC

A. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Laurie Lown 812 SW Chestnut Portland, OR 97219 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	self Occupation: Real estate agent Aggregate Year-to-Date > \$ 250.00	6/8/00	250.00
Lori Hennessy 9902 NW Engleman St Portland, OR 97229 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$ 1000.	6/8/00	1,000.00
Susan McBride 5431 Palomar Ln Dallas, TX 75229 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation: Financial manager Aggregate Year-to-Date > \$ 5000.	6/8/00	5,000.00
Jeanne Cruseman Daniels 1022 Town Pl. Houston, TX 77057 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: self Occupation Aggregate Year-to-Date > \$ 5000.	6/22/00	5000.00
Lynn Fritchman 3033 Rivercrest Dr Boise, ID 83706 Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer: military Occupation: Retired Aggregate Year-to-Date > \$ 100.	6/22/00	100.
F. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify):	Name of Employer Occupation Aggregate Year-to-Date > \$	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	
TOTAL This Period (last page this line number only)	11350.00

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2
FOR LINE NUMBER

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NAME OF COMMITTEE (In Full)

Humane USA PAC

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Chris Smith 1540 Kuser Rd # A-9 Hamilton, NJ. 08619	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/30/00	1000.
B. Full Name, Mailing Address and ZIP Code Daniel Akaka FOR SENATE 720 Hart Senate office Bldg WASH DC. 20510	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	4/30/00	1000.
C. Full Name, Mailing Address and ZIP Code Ed Whittfield FOR CONGRESS 236 Cannon House of Bldg WASH DC 20515	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/18/00	1000.
D. Full Name, Mailing Address and ZIP Code Friends of Robert C. Byrd 311 Senate Hart of Bldg WASH DC 20510	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/17/00	1000.
E. Full Name, Mailing Address and ZIP Code Vic Snyder for Congress 1319 Longworth House of Bldg. WASH DC 20515	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/10/00	500.
F. Full Name, Mailing Address and ZIP Code Bob Franks for Senate 310 W. Westfield Ave Roselle Park, NJ 07204	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	5/16/00	1000.
G. Full Name, Mailing Address and ZIP Code Friends of Jim Maloney 1213 Longworth of Bldg WASH DC 20515	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/00	1000.
H. Full Name, Mailing Address and ZIP Code Ron Kind for Congress 1713 Longworth Bldg WASH DC 20515	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/20/00	500.
I. Full Name, Mailing Address and ZIP Code Tom Allen for Congress PO Box 17766 Portland, ME 04112	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/00	1000.

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2
FOR LINE NUMBER

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NAME OF COMMITTEE (in Full)

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Bill Luther for Congress 1399 Geneva Ave #202 Oakdale MN 55128	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/24/00	1000.
Christopher Skays for Congress 1126 Longworth Bldg WASH DC 20515	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/00	1000.
Robert Menendez for Congress 405 Cannon House Bldg WASH DC 20515	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/25/00	1000.
Brian Baird for Congress 1220 Main St #360 Vancouver WA 98660	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/27/00	1000.
Zoe LOFGREN FOR CONGRESS	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/27/00	500. ⁰⁰
Earl Blumenauer for Congress	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/13/00	1000. ⁰⁰
Tammy Baldwin for Congress	for re-election Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	6/28/00	500. ⁰⁰
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

13000.00
~~12500.00~~

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 7-15-00
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked _____ and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 <i>DES</i> PREPARER	 <i>7-18-00</i> DATE PREPARED