

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

RECEIVED
FEC MAIL CENTER
2007 JUL 31 PM 4:18

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5

ORGANIC CONSUMERS FUND PAC

ADDRESS (number and street) 1858 MINTWOOD PLACE NW #4

Check if different than previously reported. (ACC) WASHINGTON DC 20009

2. FEC IDENTIFICATION NUMBER **CITY** **STATE** **ZIP CODE**

C00426338

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
- (a) Quarterly Reports:
- April 15 Quarterly Report (Q1)
 - July 15 Quarterly Report (Q2)
 - October 15 Quarterly Report (Q3)
 - January 31 Year-End Report (YE)
 - July 31 Mid-Year Report (Non-election Year Only) (MY)
 - Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 - Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 - Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on MM / DD / YYYY in the State of

(d) 30-Day POST-Election Report for the:

- General (30G) Runoff (30R) Special (30S)

Election on MM / DD / YYYY in the State of

5. Covering Period MM / DD / YYYY through MM / DD / YYYY

01 / 01 / 2007 through 06 / 30 / 2007

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 ALEXIS BADEN-MAYER

Signature of Treasurer *Alexis Baden-Mayer* Date MM / DD / YYYY

07 / 31 / 2007

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

27039494875

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

ORGANIC CONSUMERS FUND PAC

Report Covering the Period: From:

01 / 01 / 2007

To:

06 / 30 / 2007

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2007"/>		200
(b) Cash on Hand at Beginning of Reporting Period.....	200	
(c) Total Receipts (from Line 19)	48,154.00	48,154.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	48,156.00	48,560.00
7. Total Disbursements (from Line 31)	48,146.00	48,146.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	10.00	10.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	12,498.64	



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

27039494876

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

ORGANIC CONSUMERS FUND PAC

Report Covering the Period: From:

MM / DD / YYYY
01 / 01 / 2007

To:

MM / DD / YYYY
06 / 30 / 2007

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).....

7,910.00

7,910.00

(ii) Unitemized.....

4,024.40

4,024.40

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

4,815.40

4,815.40

(b) Political Party Committees.....

0

0

(c) Other Political Committees (such as PACs).....

0

0

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

4,815.40

4,815.40

12. Transfers From Affiliated/Other Party Committees.....

0

0

13. All Loans Received.....

0

0

14. Loan Repayments Received.....

0

0

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

0

0

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0

0

17. Other Federal Receipts (Dividends, Interest, etc.).....

0

0

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5).....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

4,815.40

4,815.40

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

4,815.40

4,815.40

27039494877

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) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures	48,069.00	48,069.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	48,069.00	48,069.00
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	0
29. Other Disbursements	0	0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	48,069.00	48,069.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48,069.00	48,069.00

27039494878

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	48,154.00	48,154.00
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	48,154.00	48,154.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	48,154.00	48,154.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48,154.00	48,154.00

27039494879

**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 1	OF 4
	<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)
ORGANIC CONSUMERS FUND PAC

Full Name (Last, First, Middle Initial)
A. WILLIAMS, ROSE M

Date of Receipt
05 / 13 / 2007

Mailing Address
156 SPARKLING RIDGE ROAD

City State Zip Code
NEW PALTZ NY 12561

Amount of Each Receipt this Period
3,000.00

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **3,000.00**

Full Name (Last, First, Middle Initial)
B. SCHULWOLF, MARTHE

Date of Receipt
06 / 13 / 2007

Mailing Address
109 DEVRIES CT.

City State Zip Code
PIERMONT NY 10968

Amount of Each Receipt this Period
3,600.00

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
HOMEMAKER

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **3,600.00**

Full Name (Last, First, Middle Initial)
C. WEIRS, STEVEN

Date of Receipt
06 / 13 / 2007

Mailing Address
148 WILLOW ST. APT. #3

City State Zip Code
BROOKLYN NY 11201

Amount of Each Receipt this Period
5,000.00

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date **5,000.00**

SUBTOTAL of Receipts This Page (optional) **11,600.00**

TOTAL This Period (last page this line number only)

27039494880

SCHEDULE A (FEC Form 3X)

ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 2 OF 4
 (check only one)
 11a 11b 11c 12
 13 14 15 16 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)
ORGANIC CONSUMERS FUND PAC

A. COTTON, RICHARD
 Full Name (Last, First, Middle Initial)
 Mailing Address: **1185 PARK AVE. APT. 8A**
 City: **NEW YORK** State: **NY** Zip Code: **10128**
 Date of Receipt: **04/29/2007**
 Amount of Each Receipt this Period: **250.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: Occupation:
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **250.00**

B. KLINGE, PEGGY
 Full Name (Last, First, Middle Initial)
 Mailing Address: **6220 Rt 28**
 City: **EDSON** State: **KS** Zip Code: **67733**
 Date of Receipt: **04/29/2007**
 Amount of Each Receipt this Period: **400.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **GOODLAND COMMUNITY LEARNING CENTER** Occupation: **LEARNING CENTER**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **400.00**

C. SHUMAKER, DIANNE
 Full Name (Last, First, Middle Initial)
 Mailing Address: **1501 SO LAKESTONE DR.**
 City: **OLATHE** State: **KS** Zip Code: **66061**
 Date of Receipt: **06/17/2007**
 Amount of Each Receipt this Period: **3,400.00**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: Occupation: **RETIRED**
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **3,400.00**

SUBTOTAL of Receipts This Page (optional)..... **4,050.00**
TOTAL This Period (last page this line number only).....

27039494861

**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 3 OF 4	
	<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)
ORGANIC CONSUMERS FUND PAC

Full Name (Last, First, Middle Initial) A. DANIELLE BARRANI		Date of Receipt M M / D D / Y Y Y Y 06 24 2007
Mailing Address 328 SOUTH 800 EAST		Amount of Each Receipt this Period 300.00
City SALT LAKE	State Zip Code UT 84102	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 300.00
Name of Employer SELF	Occupation FREELANCE WRITER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. WAINWRIGHT, CYNTHIA		Date of Receipt M M / D D / Y Y Y Y 06 08 2007
Mailing Address 1050 PARK AVE.		Amount of Each Receipt this Period 500.00
City NEW YORK	State Zip Code NY 10028	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 500.00
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. THORPE, DOUGLAS		Date of Receipt M M / D D / Y Y Y Y 06 12 2007
Mailing Address 1508 OLD OAK ROAD		Amount of Each Receipt this Period 250.00
City LOS ANGELES	State Zip Code CA 90049	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 250.00
Name of Employer SELF	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

27039494882

SUBTOTAL of Receipts This Page (optional).....▶	050.00
TOTAL This Period (last page this line number only).....▶	500.00

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 4 OF 4			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15			

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)
ORGANIC CONSUMERS FUND PAC

A. DOLLAR, LYNNE

Full Name (Last, First, Middle Initial)

Mailing Address: **2788 E. WHISPER DR.**

City: _____ State: _____ Zip Code: _____

Date of Receipt: **01 / 12 / 2007**

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

Amount of Each Receipt this Period: **300.00**

Name of Employer: **SELF** Occupation: **FLOORING BUSINESS**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼: **300.00**

B. PERENICH, THERESA

Full Name (Last, First, Middle Initial)

Mailing Address: **215 RIVERHILL DR.**

City: **ATHENS** State: **GA** Zip Code: **30606**

Date of Receipt: **06 / 26 / 2007**

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

Amount of Each Receipt this Period: **350.00**

Name of Employer: _____ Occupation: **RETIRED**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼: **350.00**

C. BIEDEL, MARGARET

Full Name (Last, First, Middle Initial)

Mailing Address: **140 NASSAU ST.**

City: **NEW YORK CITY NY** State: _____ Zip Code: **10038**

Date of Receipt: **06 / 26 / 2007**

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

Amount of Each Receipt this Period: **1000.00**

Name of Employer: _____ Occupation: _____

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼: **1,000.00**

SUBTOTAL of Receipts This Page (optional).....▶ **1,650.00**

TOTAL This Period (last page this line number only).....▶ **7,910.00**

27039494883

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

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)
ORGANIC CONSUMERS FUND PAC

A. Full Name (Last, First, Middle Initial)
ALEXIS BADEN-MAYER, ESQ.

Mailing Address
1858 MINTWOOD PL NW #4

City **WASHINGTON** State **DC** Zip Code **20009**

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

Name of Employer **ORGANIC CONSUMERS FUND** Occupation **LAWYER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5,000.00**

Date of Receipt **06 / 30 / 2007**

Amount of Each Receipt this Period **5,000.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

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

TOTAL This Period (last page this line number only).....▶ **5,000.00**

27039494884

**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 1 OF 1
	<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	

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)
ORGANIC CONSUMERS FUND PAC

A.

Full Name (Last, First, Middle Initial)
HUDSON BAY COMPANY of IL

Mailing Address
341 O STREET SUITE 625

City **LINCOLN** State **NE** Zip Code **68508**

Purpose of Disbursement
Telephone Fundraising

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
06 / 30 / 2007

Amount of Each Disbursement this Period
4,806.900

Category/Type
003

B.

Full Name (Last, First, Middle Initial)

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

Amount of Each Disbursement this Period

Category/Type

C.

Full Name (Last, First, Middle Initial)

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

Amount of Each Disbursement this Period

Category/Type

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

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

4,806.900

27039494885

SCHEDULE D (FEC Form 3X)
DEBTS AND OBLIGATIONS
Excluding Loans

NAME OF COMMITTEE (In Full)
ORGANIC CONSUMERS FUND PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor HUDSON BAY COMPANY OF IL	Nature of Debt (Purpose): TELEPHONE FUNDRAISING
Mailing Address 941 0 STREET SUITE 625	
City State Zip Code LINCOLN NE 68508	

Outstanding Balance Beginning This Period 91636.4	Amount Incurred This Period 3335.00	Payment This Period 0000	Outstanding Balance at Close of This Period 124986.4
---	---	------------------------------------	--

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
---	-----------------------------	---------------------	---

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
---	-----------------------------	---------------------	---

1) SUBTOTALS This Period This Page (optional).....	
2) TOTALS This Period (last page this line number only).....	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	124986.4

27039494886

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt
7/31/07

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
 Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
 Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked

Jm10
 PREPARER

8/1/07
 DATE PREPARED

27039494887