

# 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 (12S)  
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 2010 through 09 30 2010

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 J. Scheele

Signature of Treasurer Electronically Filed by J. Scheele Date 10 14 2010

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**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	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		21844.22
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	19361.54									
(c) Total Receipts (from Line 19) .....	12292.70	66313.10								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	31654.24	88157.32								
7. Total Disbursements (from Line 31) .....	24865.68	81368.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	6788.56	6788.56								
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

FEC Form 3X (Rev. 06/2004)

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	1	0

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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) .....	12272.70	65818.10
(ii) Unitemized .....	20.00	495.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	12292.70	66313.10
(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) .....	12292.70	66313.10
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 Transfer (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)) .....	12292.70	66313.10
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	12292.70	66313.10

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	11365.68	25868.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11365.68	25868.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	53500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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.....	2000.00	2000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	24865.68	81368.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24865.68	81368.76

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	12292.70	66313.10
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12292.70	66313.10
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11365.68	25868.76
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	11365.68	25868.76

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 26  
(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)  
HumaneUSA Federal PAC

**A.** Full Name (Last, First, Middle Initial)  
Kathleen Freston  
 Mailing Address 57 East 66th Street  
 City State Zip Code  
 New York NY 10065  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 1 2 / 2 0 1 0  
**Transaction ID:** A2010-2410124  
 Amount of Each Receipt this Period  
 5000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation  
 Self Employed Writer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

**B.** Full Name (Last, First, Middle Initial)  
Tom Freston  
 Mailing Address 57 East 66th Street  
 City State Zip Code  
 New York NY 10065  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 8 / 1 2 / 2 0 1 0  
**Transaction ID:** A2010-2410123  
 Amount of Each Receipt this Period  
 5000.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Firefly 3 Occupation  
 Firefly 3 Principal  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 5000.00

**C.** Full Name (Last, First, Middle Initial)  
MARY MAX  
 Mailing Address 118 RIVERSIDE DRIVE  
 APT 15 D  
 City State Zip Code  
 NEW YORK NY 10024  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 7 / 1 2 / 2 0 1 0  
**Transaction ID:** A2010-1922213  
 Amount of Each Receipt this Period  
 454.54  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self Employed Occupation  
 Self Employed HOMEMAKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2727.24

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10454.54  
**TOTAL** 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 / 26  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

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

Mailing Address 118 RIVERSIDE DRIVE  
APT 15 D

City State Zip Code  
NEW YORK NY 10024

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

Name of Employer Self Employed Occupation  
Self Employed HOMEMAKER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3181.78

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 10 / 2010

**Transaction ID:** A2010-2410128

Amount of Each Receipt this Period  
454.54

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

Mailing Address 118 RIVERSIDE DRIVE  
APT 15 D

City State Zip Code  
NEW YORK NY 10024

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

Name of Employer Self Employed Occupation  
Self Employed ARTIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2727.24

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 13 / 2010

**Transaction ID:** A2010-1922212

Amount of Each Receipt this Period  
454.54

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

Mailing Address 118 RIVERSIDE DRIVE  
APT 15 D

City State Zip Code  
NEW YORK NY 10024

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

Name of Employer Self Employed Occupation  
Self Employed ARTIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3181.78

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 13 / 2010

**Transaction ID:** A2010-2410127

Amount of Each Receipt this Period  
454.54

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1363.62

**TOTAL** 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 8 / 26	
	(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"/> 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
--

<b>A.</b>	Full Name (Last, First, Middle Initial) PETER MAX	Date of Receipt
	Mailing Address 118 RIVERSIDE DRIVE APT 15 D	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 13 / 2010
	City State Zip Code NEW YORK NY 10024	<b>Transaction ID:</b> A2010-2578935
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 454.54
	Name of Employer Self Employed Occupation ARTIST	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text"/> 3636.32

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 454.54
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 12272.70



# 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.

Full Name (Last, First, Middle Initial)  
J. Scheele

Mailing Address P.O. Box 19224

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Reimbursement for long distance expense

Candidate Name  
Jina J Scheele

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Not Applicable

Transaction ID: B344397

Date of Disbursement

07 / 02 / 2010

Amount of Each Disbursement this Period

30.00

B.

Full Name (Last, First, Middle Initial)  
Verizon

Mailing Address P.O. Box 660720

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Monthly long distance expense

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Not Applicable

Transaction ID: B344397A

Date of Disbursement

07 / 03 / 2010

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)  
J. Scheele

Mailing Address P.O. Box 19224

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Reimbursement for fax/phone expense.

Candidate Name  
Jina J Scheele

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Not Applicable

Transaction ID: B344398

Date of Disbursement

07 / 02 / 2010

Amount of Each Disbursement this Period

15.00

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

45.00

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

A. Form/Schedule : **SB21B**

Transaction ID :

Reimbursements covering expenses for long distance, internet, utilities, phone and fax will be itemized once they reach \$200 for the calendar year.

# 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.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B344399
	Mailing Address P.O. Box 19224	Date of Disbursement MM / DD / YYYY 07 / 02 / 2010
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 20.00
	Purpose of Disbursement Reimbursement for internet expense	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B344400
	Mailing Address P.O. Box 19224	Date of Disbursement MM / DD / YYYY 07 / 02 / 2010
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Reimbursement for utilities expenses	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) PEPCO	Transaction ID: B344400A
	Mailing Address 701 9th Street NW	Date of Disbursement MM / DD / YYYY 07 / 03 / 2010
	City Washington State DC Zip Code 20068	Amount of Each Disbursement this Period 30.00
	Purpose of Disbursement Monthly utilities expenses	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

[MEMO ITEM]

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

50.00

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)

PAGE 12 / 26

<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.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B344401 Date of Disbursement 07 / 09 / 2010
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Salary - Program Director.	001 Category/Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B344403 Date of Disbursement 08 / 05 / 2010
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 30.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Reimbursement for long distance expense	001 Category/Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	

C.	Full Name (Last, First, Middle Initial) Verizon	Transaction ID: B344403A Date of Disbursement 07 / 03 / 2010
	Mailing Address P.O. Box 660720	Amount of Each Disbursement this Period 30.00
	City Dallas State TX Zip Code 75266	
	Purpose of Disbursement Monthly long distance expense	001 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable	[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1376.08
<b>TOTAL</b> 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 13 / 26

<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

<p><b>A.</b> Full Name (Last, First, Middle Initial) J. Scheele</p> <p>Mailing Address P.O. Box 19224</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Reimbursement for fax/phone expense.</p> <p>Candidate Name Jina J Scheele</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B344404 <b>Date of Disbursement</b> 08 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 15.00</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) J. Scheele</p> <p>Mailing Address P.O. Box 19224</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Reimbursement for internet expense</p> <p>Candidate Name Jina J Scheele</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B344405 <b>Date of Disbursement</b> 08 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 20.00</p> <p>001 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) J. Scheele</p> <p>Mailing Address P.O. Box 19224</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Reimbursement for utilities expenses</p> <p>Candidate Name Jina J Scheele</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B344406 <b>Date of Disbursement</b> 08 / 05 / 2010</p> <p>Amount of Each Disbursement this Period 30.00</p> <p>001 Category/ Type</p>

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

65.00

**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)

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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.	Full Name (Last, First, Middle Initial) PEPCO	Transaction ID: B344406A Date of Disbursement 07 / 03 / 2010
	Mailing Address 701 9th Street NW	Amount of Each Disbursement this Period 30.00
	City Washington State DC Zip Code 20068	
	Purpose of Disbursement Monthly utilities expenses	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B347287 Date of Disbursement 08 / 06 / 2010
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Salary - Program Director.	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B348621 Date of Disbursement 09 / 03 / 2010
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 1346.08
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Salary - Program Director.	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2692.16
<b>TOTAL</b> 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.**

Full Name (Last, First, Middle Initial)  
J. Scheele

Mailing Address P.O. Box 19224

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Reimbursement for long distance expense

Candidate Name  
Jina J Scheele

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  Primary  General  Other (specify) ▼

Not Applicable

Transaction ID: B348622

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)  
Verizon

Mailing Address P.O. Box 660720

City Dallas State TX Zip Code 75266

Purpose of Disbursement  
Monthly long distance expense

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  Primary  General  Other (specify) ▼

Not Applicable

Transaction ID: B348622A

Date of Disbursement

07 / 03 / 2010

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

**C.**

Full Name (Last, First, Middle Initial)  
J. Scheele

Mailing Address P.O. Box 19224

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Reimbursement for fax/phone expense.

Candidate Name  
Jina J Scheele

Office Sought:  House  Senate  President

State: District:

Disbursement For: 2010  Primary  General  Other (specify) ▼

Not Applicable

Transaction ID: B348623

Date of Disbursement

09 / 03 / 2010

Amount of Each Disbursement this Period

15.00

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

45.00

**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 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.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B348625 Date of Disbursement 09 / 03 / 2010
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 20.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Reimbursement for internet expense	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) J. Scheele	Transaction ID: B348626 Date of Disbursement 09 / 03 / 2010
	Mailing Address P.O. Box 19224	Amount of Each Disbursement this Period 30.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Reimbursement for utilities expenses	001 Category/ Type
	Candidate Name Jina J Scheele	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) PEPCO	Transaction ID: B348626A Date of Disbursement 07 / 03 / 2010
	Mailing Address 701 9th Street NW	Amount of Each Disbursement this Period 30.00
	City Washington State DC Zip Code 20068	
	Purpose of Disbursement Monthly utilities expenses	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	50.00
<b>TOTAL</b> 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

<b>A.</b> Full Name (Last, First, Middle Initial) Lyris Technologies Mailing Address 1202 Potomac St. City Washington State DC Zip Code 20007 Purpose of Disbursement Website maintenance. Candidate Name	Transaction ID: B344396 Date of Disbursement 07 / 02 / 2010
	Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

<b>B.</b> Full Name (Last, First, Middle Initial) Lyris Technologies Mailing Address 1202 Potomac St. City Washington State DC Zip Code 20007 Purpose of Disbursement Website maintenance. Candidate Name	Transaction ID: B344402 Date of Disbursement 08 / 02 / 2010
	Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

<b>C.</b> Full Name (Last, First, Middle Initial) Lyris Technologies Mailing Address 1202 Potomac St. City Washington State DC Zip Code 20007 Purpose of Disbursement Website maintenance. Candidate Name	Transaction ID: B348619 Date of Disbursement 09 / 02 / 2010
	Amount of Each Disbursement this Period 200.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	600.00
<b>TOTAL</b> 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.	Full Name (Last, First, Middle Initial) Lyris Technologies	Transaction ID: B369778 Date of Disbursement 09 / 24 / 2010
	Mailing Address 1202 Potomac St.	Amount of Each Disbursement this Period 5765.21
	City Washington State DC Zip Code 20007	
	Purpose of Disbursement Website maintenance. Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

B.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B344410 Date of Disbursement 07 / 01 / 2010
	Mailing Address PO Box 25118	Amount of Each Disbursement this Period 523.24
	City Tampa State FL Zip Code 33622	
	Purpose of Disbursement August BankCard merchant fees Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

C.	Full Name (Last, First, Middle Initial) Bank of America	Transaction ID: B344409 Date of Disbursement 07 / 07 / 2010
	Mailing Address PO Box 25118	Amount of Each Disbursement this Period 4.95
	City Tampa State FL Zip Code 33622	
	Purpose of Disbursement August 2010 bank charge Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6293.40
<b>TOTAL</b> 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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement August 2010 bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Not Applicable</p>	<p><b>Transaction ID:</b> B344408</p> <p>Date of Disbursement 07 / 12 / 2010</p> <p>Amount of Each Disbursement this Period 15.91</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement August BankCard merchant fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Not Applicable</p>	<p><b>Transaction ID:</b> B344407</p> <p>Date of Disbursement 08 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 45.74</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement April 2010 bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: FL District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p> <p>Not Applicable</p>	<p><b>Transaction ID:</b> B347324</p> <p>Date of Disbursement 08 / 09 / 2010</p> <p>Amount of Each Disbursement this Period 4.95</p> <p>001 Category/ Type</p>

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

66.60

**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

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement August 2010 bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B347325</p> <p>Date of Disbursement 08 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 15.91</p> <p>001 Category/ Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement September BankCard merchant fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B348618</p> <p>Date of Disbursement 09 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 45.67</p> <p>001 Category/ Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bank of America</p> <p>Mailing Address PO Box 25118</p> <p>City Tampa State FL Zip Code 33622</p> <p>Purpose of Disbursement September 2010 bank charge</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable</p>	<p><b>Transaction ID:</b> B348627</p> <p>Date of Disbursement 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 4.95</p> <p>001 Category/ Type</p>

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

66.53

**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

A.

Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address PO Box 25118

City Tampa State FL Zip Code 33622

Purpose of Disbursement  
September 2010 bank charge

Candidate Name

001  
Category/  
Type

Office Sought:  House  
 Senate  
 President

State: FL

District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Not Applicable

Transaction ID: B348629

Date of Disbursement

09 / 13 / 2010

Amount of Each Disbursement this Period

15.91

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

15.91

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

11365.68

**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 / 26

<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

A.	Full Name (Last, First, Middle Initial) McNerney for Congress	Transaction ID: B346438 Date of Disbursement
	Mailing Address 6520 Village Pkwy 2nd Flr	<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Dublin State CA Zip Code 94568	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Jerry McNerney	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Peters for Congress	Transaction ID: B343596 Date of Disbursement
	Mailing Address PO Box 226	<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City Bloomfield Hills State MI Zip Code 48303	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Gary Peters	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) McCotter for Congress	Transaction ID: B344331 Date of Disbursement
	Mailing Address PO Box 530788	<input type="text" value="07"/> / <input type="text" value="30"/> / <input type="text" value="2010"/>
	City Livonia State MI Zip Code 48153	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name Thaddeus McCotter	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# 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

<b>A.</b> Full Name (Last, First, Middle Initial) Rogers for Congress <hr/> Mailing Address PO Box 581 <hr/> City Brighton State MI Zip Code 48116 <hr/> Purpose of Disbursement Contribution Candidate Name Mike J Rogers Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B344332 Date of Disbursement M M / D D / Y Y Y Y 07 / 30 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
<b>B.</b> Full Name (Last, First, Middle Initial) Gary Peters for Congress <hr/> Mailing Address PO Box 226 <hr/> City Bloomfield Hills State MI Zip Code 48303 <hr/> Purpose of Disbursement Contribution Candidate Name Gary Peters Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B369499 Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
<b>C.</b> Full Name (Last, First, Middle Initial) Carnahan in Congress <hr/> Mailing Address 7000 Chippewa St <hr/> City St. Louis State MO Zip Code 63123 <hr/> Purpose of Disbursement Contribution Candidate Name Russ Carnahan Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B369498 Date of Disbursement M M / D D / Y Y Y Y 09 / 28 / 2010
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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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

A.	Full Name (Last, First, Middle Initial) Dina Titus for Congress	Transaction ID: B343597 Date of Disbursement 07 / 27 / 2010
	Mailing Address P. O. Box 50614 Suite C5	
	City Henderson State NV Zip Code 89016	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Dina Titus Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

B.	Full Name (Last, First, Middle Initial) Betty Sutton for Congress	Transaction ID: B346439 Date of Disbursement 08 / 27 / 2010
	Mailing Address 1700 W. Market St. #155	
	City Akron State OH Zip Code 44313	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Betty Sutton Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

C.	Full Name (Last, First, Middle Initial) Friends of Jim Clyburn	Transaction ID: B343594 Date of Disbursement 07 / 20 / 2010
	Mailing Address PO Box 12567	
	City Columbia State SC Zip Code 29211	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name James E Clyburn Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3000.00
<b>TOTAL</b> 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 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

A.

Full Name (Last, First, Middle Initial)  
WV State Dem Exec. Cmte. (Fed Acct)

Mailing Address 405 CAPITOL STREET SUITE 404

City CHARLESTON State WV Zip Code 25301

Purpose of Disbursement  
Contribution

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WV District:

Not Applicable

Transaction ID: B345366

Date of Disbursement

08 / 17 / 2010

Amount of Each Disbursement this Period

2500.00

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

2500.00

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

11500.00

**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)

PAGE 26 / 26

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Friends of Peter Courtney Mailing Address 2925 Island View Drive N. City Salem State OR Zip Code 97303 Purpose of Disbursement G-2010 State Senate 11 OR Candidate Name Peter Courtney Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: B345367 Date of Disbursement M M / D D / Y Y Y Y 08 / 18 / 2010
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) Senate Democratic Leadership Fund Mailing Address P.O. Box 42215 City Portland State OR Zip Code 97242 Purpose of Disbursement State PAC Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Transaction ID: B369690 Date of Disbursement M M / D D / Y Y Y Y 09 / 23 / 2010
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

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

2000.00

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

2000.00