

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

CITY

STATE

ZIPCODE

C00350439

3. IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
July 15 Quarterly Report(Q2)
October 15 Quarterly Report(Q3)
[X] 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 (12G)

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 2005 through 12 31 2005

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 Ms. J. Scheele

Signature of Treasurer Electronically Filed by Ms. J. Scheele Date 03 27 2006

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

Table with 8 columns for office use only

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

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	0	5

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		33633.69
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period .....	10169.00									
(c) Total Receipts (from Line 19) .....	106254.13	148798.65								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	116423.13	182432.34								
7. Total Disbursements (from Line 31) .....	65888.13	131897.34								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	50535.00	50535.00								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	.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  
HumaneUSA Federal PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	91515.00	128915.00
(i) Itemized (use Schedule A) .....	14731.41	19857.17
(ii) Unitemized .....	106246.41	148772.17
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	106246.41	148772.17
12. Transfers From Affiliated/Other Party Committees .....	.00	.00
13. All Loans Received .....	.00	.00
14. Loan Repayments Received .....	.00	.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	.00	.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	.00	.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	7.72	26.48
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	.00	.00
(b) Levin Funds (from Schedule H5) .....	.00	.00
(c) Total Transfer (add 18(a) and 18(b)).	.00	.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	106254.13	148798.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	106254.13	148798.65

**DETAILED SUMMARY PAGE**

of Disbursements

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.....	.00	.00
(ii) Non-Federal Share.....	.00	.00
(b) Other Federal Operating Expenditures.....	46888.13	60647.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	46888.13	60647.34
22. Transfers to Affiliated/Other Party Committees.....	.00	.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	19000.00	70000.00
24. Independent Expenditure (use Schedule E) .....	.00	.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	.00	.00
26. Loan Repayments Made.....	.00	.00
27. Loans Made.....	.00	.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	.00	.00
(b) Political Party Committees .....	.00	.00
(c) Other Political Committees (such as PACs) .....	.00	.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	.00	.00
29. Other Disbursements.....	.00	1250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	.00	.00
(ii) "Levin" Share .....	.00	.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	.00	.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	.00	.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	65888.13	131897.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	65888.13	131897.34

**DETAILED SUMMARY PAGE**  
of Disbursements

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) .....	106246.41	148772.17
34. Total Contribution Refunds (from Line 28(d)) .....	.00	.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	106246.41	148772.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	46888.13	60647.34
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	.00	.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	46888.13	60647.34

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A. NANCI ALEXANDER</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 7809 AFTON VILLA COURT		<b>Transaction ID: A2005-2556126</b>	
City State Zip Code BOCA RATON FL 33433	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SELF EMPLOYED	Occupation HOMEMAKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Mr. Howard Baskin</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 7106 Riverwood		<b>Transaction ID: A2005-2556138</b>	
City State Zip Code Tampa FL 33615	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Howard Baskin</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 7106 Riverwood		<b>Transaction ID: A2005-2556387</b>	
City State Zip Code Tampa FL 33615	Amount of Each Receipt this Period 3000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

**A.** Full Name (Last, First, Middle Initial)  
Mrs. Barbara Birdsey

Mailing Address P.O. Box 279

City State Zip Code  
West Barnstable MA 02668

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
MM / DD / YYYY  
08 / 30 / 2005

Transaction ID: A2005-2556121

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Charles Birdsey

Mailing Address P.O. Box 279

City State Zip Code  
West Barnstable MA 02668

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
MM / DD / YYYY  
12 / 29 / 2005

Transaction ID: A2005-2556122

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
Mrs. Shirley Coffey

Mailing Address 12713 54th Ave. NW

City State Zip Code  
Gig Harbor WA 98332

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

Name of Employer RETIRED Occupation retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 15 / 2005

Transaction ID: A2005-2556150

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Fred Cohen		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address PO Box 1838		<b>Transaction ID:</b> A2005-2556151	
City State Zip Code Jupiter FL 33468		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Harriett M. Crosby		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 6515 79th Place		<b>Transaction ID:</b> A2005-2556156	
City State Zip Code Cabin John MD 20818		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer SELF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation consultant Aggregate Year-to-Date ▼ 5000.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Ms. Jeanne Crusemann Daniels		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5	
Mailing Address 1022 Townplace		<b>Transaction ID:</b> A2005-2556158	
City State Zip Code Houston TX 77057		Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer SELF Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation real estate Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Thomas DiCarrado		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 123 Angola Road		Transaction ID: A2005-2556087
City State Zip Code Cornwall NY 12518	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer HumaneUSA	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Thomas DiCarrado		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 9 / 2 0 0 5
Mailing Address 123 Angola Road		Transaction ID: A2005-2556088
City State Zip Code Cornwall NY 12518	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer HumaneUSA	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. AMY DUBMAN		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 4 / 2 0 0 5
Mailing Address 14189 WOODMILL COVE DR.		Transaction ID: A2005-2556168
City State Zip Code CHESTERFIELD MO 63017	Amount of Each Receipt this Period 2000.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INFORMATION REQUESTED	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A. JIM DUNN</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 5
Mailing Address 200 N. Arlington Heights Road		<b>Transaction ID: A2005-2556090</b>
City State Zip Code Arlington Heights IL 60004	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NONE	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) <b>B. JANE GALE</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address 6722 N RAINBOW BLVD		<b>Transaction ID: A2005-2556187</b>
City State Zip Code LAS VEGAS NV 89131	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>C. Jeffrey Gale</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5
Mailing Address 6722 N Rainbow Blvd		<b>Transaction ID: A2005-2556188</b>
City State Zip Code Las Vegas NV 89131	Amount of Each Receipt this Period 5000.00	
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 46
	<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

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

**A.** Full Name (Last, First, Middle Initial)  
BRAD GOLDBERG

Mailing Address 502 ORIENTA AVENUE

City MAMARONECK State NY Zip Code 10543

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: A2005-2556098

Amount of Each Receipt this Period  
2500.00

**B.** Full Name (Last, First, Middle Initial)  
BRAD GOLDBERG

Mailing Address 502 ORIENTA AVENUE

City MAMARONECK State NY Zip Code 10543

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: A2005-2556097

Amount of Each Receipt this Period  
2500.00

**C.** Full Name (Last, First, Middle Initial)  
NANCY GROVE

Mailing Address 7 SUNNYMEADE DRIVE

City ST LOUIS State MO Zip Code 63124

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 9 / 2 0 0 5

Transaction ID: A2005-2556199

Amount of Each Receipt this Period  
2500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A. NANCY GROVE</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 7 SUNNYMEADE DRIVE		<b>Transaction ID: A2005-2556216</b>	
City State Zip Code ST LOUIS MO 63124		Amount of Each Receipt this Period 2500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED		Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. GERALYN GULSETH</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 5	
Mailing Address 110 LAGUNARIA LN.		<b>Transaction ID: A2005-2556217</b>	
City State Zip Code ALAMEDA CA 94502		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer SELF EMPLOYED		Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C. Robert W. Hull</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 8 / 2 0 0 5	
Mailing Address 9648 Old Bonhomme Rd		<b>Transaction ID: A2005-2556236</b>	
City State Zip Code St. Louis MO 63132		Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

**A.** Full Name (Last, First, Middle Initial)  
CHRISTOPHER KERR

Mailing Address 134 NEW BETHEL RD

City State Zip Code  
KEMPTON PA 19529

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: A2005-2556244

Amount of Each Receipt this Period  
5000.00

**B.** Full Name (Last, First, Middle Initial)  
Jack Knox

Mailing Address 200 Cresent C0urt

City State Zip Code  
Dallas ZZ 75201

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

Name of Employer HumaneUSA Occupation Lawyer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 5

Transaction ID: A2005-2556248

Amount of Each Receipt this Period  
500.00

**C.** Full Name (Last, First, Middle Initial)  
JANA KOHL

Mailing Address 234 W. CONCORD LANE

City State Zip Code  
CHICAGO IL 60614

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

Name of Employer INFORMATION REQUESTED Occupation PSY.D

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 3 0 / 2 0 0 5

Transaction ID: A2005-2556249

Amount of Each Receipt this Period  
5000.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

<b>A.</b> Full Name (Last, First, Middle Initial) Rudy Kohn Mailing Address 3 Wisteria CT. City Lakewood State NJ Zip Code 08701 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5 <b>Transaction ID: A2005-2556250</b> Amount of Each Receipt this Period 1000.00
Name of Employer INFORMATION REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation INFORMATION REQUESTED Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Dr. Joann Lamp Mailing Address 911 Juliet Lane City Arnold State MD Zip Code 21012 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 8 / 2 0 0 5 <b>Transaction ID: A2005-2556257</b> Amount of Each Receipt this Period 300.00
Name of Employer Retired Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation Retired Aggregate Year-to-Date ▼ 300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MIA MACDONALD Mailing Address 75 THIRD PLACE City BROOKLYN State NY Zip Code 11231 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5 <b>Transaction ID: A2005-2556269</b> Amount of Each Receipt this Period 500.00
Name of Employer SELF EMPLOYED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation CONSULTANT Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1800.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 46
	<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

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A. CHERYL MCAULIFFE</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 1 5 / 2 0 0 5	
Mailing Address 9452 LOGAN LANE		<b>Transaction ID: A2005-2556282</b>	
City State Zip Code DOUGLASVILLE GA 30135	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SELF EMPLOYED	Occupation REAL ESTATE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>B. Ms. Joan McAuliffe</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 929 North Primrose Ave.		<b>Transaction ID: A2005-2556283</b>	
City State Zip Code Rialito CA 92376-4558	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. Mr. Gil Michaels</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address PO Box 5313		<b>Transaction ID: A2005-2556290</b>	
City State Zip Code Beverly Hills CA 90209	Amount of Each Receipt this Period 5000.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFORMATION REQUESTED	Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	5600.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A.</b> Mrs. Polly Michaels		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5	
Mailing Address PO Box 5312		Transaction ID: A2005-2556291	
City Beverly Hills	State CA	Zip Code 90209	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED		Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Jamie Murdock		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 12802 Easy St.		Transaction ID: A2005-2556297	
City Tampa	State FL	Zip Code 33625	Amount of Each Receipt this Period 536.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 536.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Jamie Murdock		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 12802 Easy St.		Transaction ID: A2005-2556223	
City Tampa	State FL	Zip Code 33625	Amount of Each Receipt this Period 3000.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED		Occupation INFORMATION REQUESTED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 3536.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8536.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A. Linda Nealon</b>		Date of Receipt M M / D D / Y Y Y Y 08 / 04 / 2005	
Mailing Address 2307 Harbor Vista		<b>Transaction ID: A2005-2556107</b>	
City Malibu	State CA	Zip Code 90265	Amount of Each Receipt this Period 5000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer HumaneUSA	Occupation Housewife		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>B. Wayne Pacelle</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2005	
Mailing Address 21225 Golf Estate Dr		<b>Transaction ID: A2005-2556225</b>	
City gaithersburg	State MD	Zip Code 20883	Amount of Each Receipt this Period 2500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer HumaneUSA	Occupation Executive		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) <b>C. Cynthia Pett-Dante</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 04 / 2005	
Mailing Address 10460 Charring Cross Rd.		<b>Transaction ID: A2005-2556315</b>	
City Los Angeles	State ZZ	Zip Code 90024	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer HumaneUSA	Occupation none listed-second request made		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 46
	<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)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A. DANIEL PHILLIPS</b>		Date of Receipt M M / D D / Y Y Y Y 1 1 / 0 8 / 2 0 0 5	
Mailing Address 3307 POTTERTON DRIVE		<b>Transaction ID: A2005-2556227</b>	
City State Zip Code FALLS CHURCH VA 22044	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SELF EMPLOYED	Occupation ATTORNEY		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>B. Paul F. Selnick</b>		Date of Receipt M M / D D / Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 11049 Gaither Farm Road		<b>Transaction ID: A2005-2556229</b>	
City State Zip Code Ellicott City MD 21402	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INFORMATION REQUESTED	Occupation INFORMATION REQUESTED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>C. ELIZABETH SIMON</b>		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 4 / 2 0 0 5	
Mailing Address 75-750 BERYL LANE		<b>Transaction ID: A2005-2556345</b>	
City State Zip Code INDIAN WELLS CA 92210	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1250.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

**A.** Full Name (Last, First, Middle Initial)  
Ms. MARIANN SULLIVAN

Mailing Address 101 TOMPSON ST

City State Zip Code  
NEW YORK NY 10012

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

Name of Employer SELF EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 03 / 2005

Transaction ID: A2005-2556353

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
Elizabeth Tilbury

Mailing Address P.O. Box 19224

City State Zip Code  
Washington DC 20036

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

Name of Employer HumaneUSA Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 04 / 2005

Transaction ID: A2005-2556360

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
Jaime Veronica

Mailing Address 7108 Riverwood Blvd.

City State Zip Code  
Tampa FL 33615

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

Name of Employer INFORMATION REQUESTED Occupation INFORMATION REQUESTED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
329.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 04 / 2005

Transaction ID: A2005-2556366

Amount of Each Receipt this Period  
329.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>779.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 46
	<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	

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NAME OF COMMITTEE (In Full)  
HumaneUSA Federal PAC

**A.** Full Name (Last, First, Middle Initial)  
MARK WILLIAMS

Mailing Address 100 CAMERON STATION BLVD.

City State Zip Code  
ALEXANDRIA VT 22304

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

Name of Employer Occupation  
SELF EMPLOYED LAWYER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 5

Transaction ID: A2005-2556374

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
ANNE WILSON

Mailing Address 660 OLD DUNSTABLE

City State Zip Code  
GROTON MT 01450

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 5

Transaction ID: A2005-2556375

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
WILHELM WINTER

Mailing Address 3901 LOMA VISTA AVE.

City State Zip Code  
OAKLAND CA 94619

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

Name of Employer Occupation  
INFORMATION REQUESTED INFORMATION REQUESTED

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 4 / 2 0 0 5

Transaction ID: A2005-2556376

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	950.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 46
	<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)  
HumaneUSA Federal PAC

Full Name (Last, First, Middle Initial) <b>A.</b> K. William Wiseman		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 8 / 2 0 0 5	
Mailing Address P.O.Box 120		<b>Transaction ID:</b> A2005-2556233	
City Woolwich	State ME	Zip Code 04579	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Sandra Wolkov		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 1631 NE 5th Street		<b>Transaction ID:</b> A2005-2556377	
City Fort Lauderdale	State FL	Zip Code 33301	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer INFORMATION REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation INFORMATION REQUESTED Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Michael Xenakis		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 2 9 / 2 0 0 5	
Mailing Address 114 Melville Loop		<b>Transaction ID:</b> A2005-2556381	
City Chapel Hill	State ZZ	Zip Code 27514	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer HumaneUSA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Occupation None listed - second request made Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1500.00
<b>TOTAL</b> This Period (last page this line number only) .....	91515.00

**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 22 / 46

<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

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		<b>Transaction ID: B133218</b> Date of Disbursement 07 / 01 / 2005
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 45.65
City Tampa	State FL Zip Code 33622	
Purpose of Disbursement Bank Service Charge		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: FL District:	Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. Lyris Technologies</b>		<b>Transaction ID: B133247</b> Date of Disbursement 07 / 07 / 2005
Mailing Address 1202 Potomac St.		Amount of Each Disbursement this Period 50.00
City Washington	State DC Zip Code 20007	
Purpose of Disbursement Website maintenance		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: CA District:	Not Applicable	

Full Name (Last, First, Middle Initial) <b>C. J. Scheele</b>		<b>Transaction ID: B133278</b> Date of Disbursement 07 / 18 / 2005
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 336.54
City Washington	State DC Zip Code 20009	
Purpose of Disbursement Salary - Program Director		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: District:	Not Applicable	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	432.19
<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

<b>A. J. Scheele</b> Full Name (Last, First, Middle Initial) Mailing Address 1624 Corcoran Street City Washington State DC Zip Code 20009 Purpose of Disbursement Salary - Program Director Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<b>Transaction ID: B133279</b> Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2005 Amount of Each Disbursement this Period 336.54 Category/Type 001
--	--	--

<b>B. Public Affairs Support Services Inc.</b> Full Name (Last, First, Middle Initial) Mailing Address 1020 North Fairfax St. 5th Floor City Alexandria State VA Zip Code 22314 Purpose of Disbursement PAC administration fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<b>Transaction ID: B133258</b> Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2005 Amount of Each Disbursement this Period 4755.59 Category/Type 001
---	--	---

<b>C. Kuzins &amp; Company</b> Full Name (Last, First, Middle Initial) Mailing Address 926 J Street Suite 1218 City Sacramento State CA Zip Code 95814 Purpose of Disbursement In-house mailing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<b>Transaction ID: B133244</b> Date of Disbursement M M / D D / Y Y Y Y 08 / 01 / 2005 Amount of Each Disbursement this Period 893.55 Category/Type 001
---	--	--

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5985.68
<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)

<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

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		<b>Transaction ID:</b> B133219 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 5
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 45.15
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/Type

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID:</b> B133263 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 5
Mailing Address P.O. Box 17464		Amount of Each Disbursement this Period 11.66
City Tucson State AZ Zip Code 85731	Purpose of Disbursement Cell phone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/Type

Full Name (Last, First, Middle Initial) <b>C. Lyris Technologies</b>		<b>Transaction ID:</b> B133248 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 1202 Potomac St.		Amount of Each Disbursement this Period 450.00
City Washington State DC Zip Code 20007	Purpose of Disbursement Website maintenance Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	506.81
<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

Full Name (Last, First, Middle Initial) <b>A. Lyris Technologies</b>		<b>Transaction ID: B133249</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 1202 Potomac St.		Amount of Each Disbursement this Period 100.00
City Washington State DC Zip Code 20007	Purpose of Disbursement Website maintenance Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. Public Affairs Support Services Inc.</b>		<b>Transaction ID: B133259</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 5
Mailing Address 1020 North Fairfax St. 5th Floor		Amount of Each Disbursement this Period 626.59
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC administration fees Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>C. J. Scheele</b>		<b>Transaction ID: B133229</b> Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 5
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1009.62
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1736.21
<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

<b>A.</b> Full Name (Last, First, Middle Initial) J. Scheele		<b>Transaction ID:</b> B133230 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 5
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 336.54
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <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) J. Scheele		<b>Transaction ID:</b> B133231 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1009.62
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <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) J. Scheele		<b>Transaction ID:</b> B133232 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 336.54
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

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

1682.70

**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

Full Name (Last, First, Middle Initial) <b>A. Oklahoma State Treasurer-Ethics Comm.</b>		<b>Transaction ID:</b> B133254 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 1 8 / 2 0 0 5
Mailing Address 2300 N. Lincoln Blvs.		Amount of Each Disbursement this Period 10.00
City Oklahoma City State OK Zip Code 73105	Purpose of Disbursement Report filing fee Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

Full Name (Last, First, Middle Initial) <b>B. Power of One Conference 2005</b>		<b>Transaction ID:</b> B133257 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 5
Mailing Address 3500 Boston Street Suite 325		Amount of Each Disbursement this Period 279.00
City Baltimore State MD Zip Code 21224	Purpose of Disbursement Conference registration Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

Full Name (Last, First, Middle Initial) <b>C. Verizon</b>		<b>Transaction ID:</b> B133264 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 8 / 3 0 / 2 0 0 5
Mailing Address P.O. Box 17464		Amount of Each Disbursement this Period 11.66
City Tucson State AZ Zip Code 85731	Purpose of Disbursement Cell phone Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: 2005 <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) ..... ▶	300.66
<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

Full Name (Last, First, Middle Initial) <b>A. J. Scheele</b>		<b>Transaction ID: B133233</b> Date of Disbursement 08 / 30 / 2005	
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1009.62	
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>B. J. Scheele</b>		<b>Transaction ID: B133234</b> Date of Disbursement 08 / 30 / 2005	
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 336.54	
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		<b>Transaction ID: B133224</b> Date of Disbursement 08 / 31 / 2005	
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 3.00	
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: FL District: Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1349.16
<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

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		<b>Transaction ID: B133220</b> Date of Disbursement 09 / 01 / 2005	
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 208.72	
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service 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: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Non-Federal		

Full Name (Last, First, Middle Initial) <b>B. J. Scheele</b>		<b>Transaction ID: B133235</b> Date of Disbursement 09 / 23 / 2005	
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 336.54	
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		<b>Transaction ID: B133221</b> Date of Disbursement 10 / 03 / 2005	
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 45.65	
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service 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: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	590.91
<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

<b>A.</b> Full Name (Last, First, Middle Initial) J. Scheele		<b>Transaction ID:</b> B133236 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 5
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 336.54
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <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) J. Scheele		<b>Transaction ID:</b> B133237 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 5
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.08
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <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) J. Scheele		<b>Transaction ID:</b> B133238 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 5
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.08
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	Category/Type 001

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

3028.70

**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

Full Name (Last, First, Middle Initial) <b>A. J. Scheele</b>		<b>Transaction ID: B133239</b> Date of Disbursement 10 / 31 / 2005	
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.08	
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		<b>Transaction ID: B133225</b> Date of Disbursement 10 / 31 / 2005	
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 3.00	
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: FL District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		<b>Transaction ID: B133222</b> Date of Disbursement 11 / 01 / 2005	
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 46.07	
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: FL District: Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1395.15
<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)

<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

Full Name (Last, First, Middle Initial) <b>A. Kuzins &amp; Company</b>		<b>Transaction ID: B133245</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 5	
Mailing Address 926 J Street Suite 1218		Amount of Each Disbursement this Period 12642.31	
City Sacramento State CA Zip Code 95814	Purpose of Disbursement In-house mailing	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: CA District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID: B133265</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 5	
Mailing Address P.O. Box 17464		Amount of Each Disbursement this Period 100.00	
City Tucson State AZ Zip Code 85731	Purpose of Disbursement Cell phone	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: AZ District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T Insurance Services Inc.</b>		<b>Transaction ID: B133262</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 5	
Mailing Address 3975 Fair Ridge Drive		Amount of Each Disbursement this Period 1670.00	
City Fairfax State VA Zip Code 22033	Purpose of Disbursement Insurance payment	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: VA District: Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	14412.31
<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

Full Name (Last, First, Middle Initial) <b>A. Lyris Technologies</b>		<b>Transaction ID: B133250</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 5
Mailing Address 1202 Potomac St.		Amount of Each Disbursement this Period 400.00
City Washington State DC Zip Code 20007	001 Category/ Type	
Purpose of Disbursement Website maintenance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID: B133266</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 3 / 2 0 0 5
Mailing Address P.O. Box 17464		Amount of Each Disbursement this Period 34.97
City Tucson State AZ Zip Code 85731	001 Category/ Type	
Purpose of Disbursement Cell phone Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) <b>C. J. Scheele</b>		<b>Transaction ID: B133815</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 4 / 2 0 0 5
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.08
City Washington State DC Zip Code 20009	001 Category/ Type	
Purpose of Disbursement Salary - Program Director Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1781.05
<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

Full Name (Last, First, Middle Initial) <b>A. Verizon</b>		<b>Transaction ID: B133267</b> Date of Disbursement 11 / 16 / 2005
Mailing Address P.O. Box 17464		Amount of Each Disbursement this Period 34.97
City Tucson State AZ Zip Code 85731	Purpose of Disbursement Cell phone Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>B. Public Affairs Support Services Inc.</b>		<b>Transaction ID: B133260</b> Date of Disbursement 11 / 16 / 2005
Mailing Address 1020 North Fairfax St. 5th Floor		Amount of Each Disbursement this Period 700.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC administration fees Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

Full Name (Last, First, Middle Initial) <b>C. J. Scheele</b>		<b>Transaction ID: B133240</b> Date of Disbursement 11 / 16 / 2005
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 928.00
City Washington State DC Zip Code 20009	Purpose of Disbursement Reimburse booth registration Candidate Name Category/Type: 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1662.97
<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

Full Name (Last, First, Middle Initial) <b>A. J. Scheele</b>		<b>Transaction ID: B133241</b> Date of Disbursement 11 / 28 / 2005	
Mailing Address 1624 Corcoran Street		Amount of Each Disbursement this Period 1346.08	
City Washington State DC Zip Code 20009	Purpose of Disbursement Salary - Program Director	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		<b>Transaction ID: B133228</b> Date of Disbursement 11 / 30 / 2005	
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 30.30	
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: FL District: Not Applicable		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		<b>Transaction ID: B133226</b> Date of Disbursement 11 / 30 / 2005	
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 3.00	
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge	001 Category/ Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: FL District: Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1379.38
<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

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		<b>Transaction ID: B133223</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address PO Box 25118		Amount of Each Disbursement this Period 45.05
City Tampa State FL Zip Code 33622	Purpose of Disbursement Bank Service Charge Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

Full Name (Last, First, Middle Initial) <b>B. Kuzins &amp; Company</b>		<b>Transaction ID: B133246</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 926 J Street Suite 1218		Amount of Each Disbursement this Period 3400.00
City Sacramento State CA Zip Code 95814	Purpose of Disbursement In-house mailing Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

Full Name (Last, First, Middle Initial) <b>C. Public Affairs Support Services Inc.</b>		<b>Transaction ID: B133261</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 1020 North Fairfax St. 5th Floor		Amount of Each Disbursement this Period 4011.00
City Alexandria State VA Zip Code 22314	Purpose of Disbursement PAC administration fees Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable	001 Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7456.05
<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

Full Name (Last, First, Middle Initial) <b>A. Lyris Technologies</b>		<b>Transaction ID: B133251</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address 1202 Potomac St.		Amount of Each Disbursement this Period 200.00
City Washington State DC Zip Code 20007	001 Category/ Type	
Purpose of Disbursement Website maintenance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) <b>B. Verizon</b>		<b>Transaction ID: B133268</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 5
Mailing Address P.O. Box 17464		Amount of Each Disbursement this Period 34.97
City Tucson State AZ Zip Code 85731	001 Category/ Type	
Purpose of Disbursement Cell phone Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

Full Name (Last, First, Middle Initial) <b>C. Lyris Technologies</b>		<b>Transaction ID: B133252</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 5
Mailing Address 1202 Potomac St.		Amount of Each Disbursement this Period 200.00
City Washington State DC Zip Code 20007	001 Category/ Type	
Purpose of Disbursement Website maintenance Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	434.97
<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)

<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. J. Scheele</b> Full Name (Last, First, Middle Initial) Mailing Address 1624 Corcoran Street City Washington State DC Zip Code 20009 Purpose of Disbursement Salary - Program Director Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<b>Transaction ID: B133242</b> Date of Disbursement 12 / 12 / 2005 Amount of Each Disbursement this Period 1346.08 Category/Type: 001
--	--	--

<b>B. USPS</b> Full Name (Last, First, Middle Initial) Mailing Address 20th Street Station City Washington State DC Zip Code 20036 Purpose of Disbursement PO Box rental Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<b>Transaction ID: B133256</b> Date of Disbursement 12 / 13 / 2005 Amount of Each Disbursement this Period 45.00 Category/Type: 001
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<b>C. J. Scheele</b> Full Name (Last, First, Middle Initial) Mailing Address 1624 Corcoran Street City Washington State DC Zip Code 20009 Purpose of Disbursement Salary - Program Director Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2005 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Not Applicable		<b>Transaction ID: B133243</b> Date of Disbursement 12 / 23 / 2005 Amount of Each Disbursement this Period 1346.08 Category/Type: 001
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2737.16
<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

Full Name (Last, First, Middle Initial) <b>A. Bank of America</b>		<b>Transaction ID: B133227</b>	
Mailing Address PO Box 25118		Date of Disbursement 12 / 30 / 2005	
City Tampa	State FL	Zip Code 33622	Amount of Each Disbursement this Period 3.00
Purpose of Disbursement Bank Service Charge		001	Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) ▼	2005 Not Applicable	
State: FL	District:		

Full Name (Last, First, Middle Initial) <b>B. Bank of America</b>		<b>Transaction ID: B133255</b>	
Mailing Address PO Box 25118		Date of Disbursement 12 / 30 / 2005	
City Tampa	State FL	Zip Code 33622	Amount of Each Disbursement this Period 0.07
Purpose of Disbursement Bank Service Charge		001	Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) ▼	2005 Not Applicable	
State: FL	District:		

Full Name (Last, First, Middle Initial) <b>C. Bank of America</b>		<b>Transaction ID: B133253</b>	
Mailing Address PO Box 25118		Date of Disbursement 12 / 30 / 2005	
City Tampa	State FL	Zip Code 33622	Amount of Each Disbursement this Period 13.00
Purpose of Disbursement Bank Service Charge		001	Category/ Type
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) ▼	2005 Not Applicable	
State: FL	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>16.07</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>46888.13</b>

**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

Full Name (Last, First, Middle Initial) <b>A. Rogers for Congress</b>		<b>Transaction ID: B133810</b> Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2005
Mailing Address P.O. Box 581		Amount of Each Disbursement this Period 500.00
City Brighton State MI Zip Code 48116	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 08 MI		
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: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Collin Peterson for Congress</b>		<b>Transaction ID: B133809</b> Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2005
Mailing Address 26192 Floyd Lake Point Road		Amount of Each Disbursement this Period 1000.00
City Detroit Lakes State MN Zip Code 56501	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 07 MN		
Candidate Name Collin Peterson		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 07	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Congressman Peter DeFazio</b>		<b>Transaction ID: B133269</b> Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2005
Mailing Address P.O. Box 1316		Amount of Each Disbursement this Period 1000.00
City Springfield State OR Zip Code 97477	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 04 OR		
Candidate Name Peter A DeFazio		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<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)

<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

Full Name (Last, First, Middle Initial) <b>A. Tom Davis for Congress</b>		<b>Transaction ID: B133270</b> Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2005	
Mailing Address 6429 Downing Court		Amount of Each Disbursement this Period 1000.00	
City Annandale	State VA	Zip Code 22003	011 Category/ Type
Purpose of Disbursement P-2006 U.S. House 11 VA		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Thomas M Davis			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 11		

Full Name (Last, First, Middle Initial) <b>B. Snowe for Senate</b>		<b>Transaction ID: B133271</b> Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2005	
Mailing Address P.O. Box 2006		Amount of Each Disbursement this Period 1000.00	
City Portland	State ME	Zip Code 04104	011 Category/ Type
Purpose of Disbursement P-2006 U.S. Senate ME		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Olympia J Snowe			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: ME District:		

Full Name (Last, First, Middle Initial) <b>C. Cmte to Re-elect Trent Franks to Congress</b>		<b>Transaction ID: B133272</b> Date of Disbursement M M / D D / Y Y Y Y 07 / 28 / 2005	
Mailing Address 12416 N 57th Drive		Amount of Each Disbursement this Period 1000.00	
City Glendale	State AZ	Zip Code 85304	011 Category/ Type
Purpose of Disbursement P-2006 U.S. House 02 AZ		Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Candidate Name Trent Franks			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 02		

<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)

<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

Full Name (Last, First, Middle Initial) <b>A. Akaka in 2006</b>		<b>Transaction ID: B133273</b> Date of Disbursement 10 / 03 / 2005	
Mailing Address P.O. Box 3169		Amount of Each Disbursement this Period 1000.00	
City Honolulu State HI Zip Code 96802	Purpose of Disbursement P-2006 U.S. Senate HI	011 Category/ Type	
Candidate Name Daniel K Akaka	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: HI District:		

Full Name (Last, First, Middle Initial) <b>B. Gallegly for Congress</b>		<b>Transaction ID: B133277</b> Date of Disbursement 11 / 03 / 2005	
Mailing Address P.O. Box 940001		Amount of Each Disbursement this Period 1000.00	
City Simi Valley State CA Zip Code 93094	Purpose of Disbursement P-2006 U.S. House 24 CA	011 Category/ Type	
Candidate Name Elton Gallegly	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 24		

Full Name (Last, First, Middle Initial) <b>C. Whitfield for Congress</b>		<b>Transaction ID: B133280</b> Date of Disbursement 11 / 03 / 2005	
Mailing Address P.O. Box 391		Amount of Each Disbursement this Period 2000.00	
City Hopkinsville State KY Zip Code 42241	Purpose of Disbursement P-2006 U.S. House 01 KY	011 Category/ Type	
Candidate Name Edward Whitfield	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: KY District: 01		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<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)

<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

Full Name (Last, First, Middle Initial) <b>A. Blumenauer for Congress</b>		<b>Transaction ID: B133281</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 9 / 2 0 0 5
Mailing Address 921 SW Washington Suite 810		Amount of Each Disbursement this Period 500.00
City Portland State OR Zip Code 97205	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 03 OR		
Candidate Name Earl Blumenauer		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 03	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Santorum 2006</b>		<b>Transaction ID: B133282</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 1 0 / 2 0 0 5
Mailing Address One Tower Bridge Suite 1440		Amount of Each Disbursement this Period 1000.00
City West Conshohocken State PA Zip Code 19428	011 Category/ Type	
Purpose of Disbursement G-2006 U.S. Senate PA		
Candidate Name Richard J Santorum		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. DeWine for U.S. Senate</b>		<b>Transaction ID: B133274</b> Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 9 / 2 0 0 5
Mailing Address P.O. Box 340188		Amount of Each Disbursement this Period 1000.00
City Columbus State OH Zip Code 43234	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. Senate OH		
Candidate Name Mike DeWine		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<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 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

Full Name (Last, First, Middle Initial) <b>A. Sweeney for Congress</b>		<b>Transaction ID:</b> B133275 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 5
Mailing Address P.O. Box 1465		Amount of Each Disbursement this Period 1000.00
City Clifton Park State NY Zip Code 12065		
Purpose of Disbursement P-2006 U.S. House 20 NY Candidate Name John E Sweeney Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 20	011 Category/Type	

Full Name (Last, First, Middle Initial) <b>B. Keep Nick Rahall in Congress Cmte</b>		<b>Transaction ID:</b> B133276 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address P O Box 64		Amount of Each Disbursement this Period 2000.00
City Beckley State WV Zip Code 25802		
Purpose of Disbursement P-2006 U.S. House 03 WV Candidate Name Nick J Rahall Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: WV District: 03	011 Category/Type	

Full Name (Last, First, Middle Initial) <b>C. Bartlett for Congress Cmte</b>		<b>Transaction ID:</b> B133283 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 0 2 / 2 0 0 5
Mailing Address P.O. Box 280 & P.O. Box 3662		Amount of Each Disbursement this Period 1000.00
City Buckeystown State MD Zip Code 21717		
Purpose of Disbursement P-2006 U.S. House 06 MD Candidate Name Roscoe Bartlett Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District: 06	011 Category/Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<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

Full Name (Last, First, Middle Initial) <b>A. Friends of George Allen</b>		<b>Transaction ID: B133284</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 0 8 / 2 0 0 5
Mailing Address Post Office Box 6859		Amount of Each Disbursement this Period 1000.00
City Arlington State VA Zip Code 22206	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. Senate VA		
Candidate Name George Allen		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Christopher Shays for Congress Cmte</b>		<b>Transaction ID: B133285</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address 98 East Avenue Rear Building		Amount of Each Disbursement this Period 1000.00
City Norwalk State CT Zip Code 06851	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 04 CT		
Candidate Name Christopher Shays		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 04	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Sam Farr</b>		<b>Transaction ID: B133286</b> Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 5
Mailing Address 555 Capitol Mall Suite 1425		Amount of Each Disbursement this Period 1000.00
City Sacramento State CA Zip Code 95814	011 Category/ Type	
Purpose of Disbursement P-2006 U.S. House 17 CA		
Candidate Name Sam Farr		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 17	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	<b>19000.00</b>

Image# 26950012954

Form/Schedule: SA11A1

Transaction ID:

As the FEC Reports Analysis Division staff is aware, an external audit was recently performed for the Humane USA Political Action Committee. As a result of the audit findings, the 2005 Year End Report is amended to include unitemized receipts from individuals on Line 11(a)(ii), which were previously undisclosed. The beginning and ending balances of this report have also changed accordingly.

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