

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
Organic Consumers Fund PAC

ADDRESS (number and street) 1858 Mintwood Place, NW #4
 Check if different than previously reported. (ACC)
Washington DC 20009

2. **FEC IDENTIFICATION NUMBER** C00426338
3. IS THIS REPORT **NEW (N)** **OR** **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 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 04 01 2008 through 06 30 2008

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 Alexis Lynn Baden-Mayer, Esq.

Signature of Treasurer Electronically Filed by Ms Alexis Lynn Baden-Mayer, Esq. Date 07 15 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Organic Consumers Fund PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		8.58
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	99.58									
(c) Total Receipts (from Line 19)	18424.11	38858.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	18523.69	38866.80								
7. Total Disbursements (from Line 31)	18378.11	38721.22								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	145.58	145.58								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	687.44									

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
Organic Consumers Fund PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	2875.00	3975.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	15549.11	34883.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)	18424.11	38858.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	18424.11	38858.22
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	18424.11	38858.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	18424.11	38858.22

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.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	18378.11	38721.22
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	18378.11	38721.22
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	18378.11	38721.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18378.11	38721.22

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	18424.11	38858.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	18424.11	38858.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	18378.11	38721.22
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	18378.11	38721.22

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 12
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
Organic Consumers Fund PAC

A. Full Name (Last, First, Middle Initial)
John E Coleman

Mailing Address 75 Turkey Hill Rd

City Ithaca State NY Zip Code 14850-2936

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

Name of Employer CORNELL UNIVERSITY Occupation PROFESSOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 03 / 2008

Transaction ID: SA11AI.10606

Amount of Each Receipt this Period 100.00

B. Full Name (Last, First, Middle Initial)
Shavonne M Griffin

Mailing Address 2454 County Highway 35

City Schenevus State NY Zip Code 12155-2402

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

Name of Employer SELF Occupation FARMER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2008

Transaction ID: SA11AI.10863

Amount of Each Receipt this Period 200.00

C. Full Name (Last, First, Middle Initial)
Elizabeth O'connor

Mailing Address 1 Bishop Gadsden Way C 46

City Charleston State SC Zip Code 29412-3563

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

Name of Employer SELF Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 14 / 2008

Transaction ID: SA11AI.10971

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ▶ 400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 12
	<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)
Organic Consumers Fund PAC

A. Full Name (Last, First, Middle Initial)
Theresa Perenich

Mailing Address 215 Riverhill Dr

City Athens State GA Zip Code 30606

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 ▼ 275.00

Date of Receipt 04 / 05 / 2008

Transaction ID: SA11AI.10291

Amount of Each Receipt this Period 125.00

B. Full Name (Last, First, Middle Initial)
Anne Delaney @ Starry Night Foundation

Mailing Address 55 Exchange Pl

City New York State NY Zip Code 10005

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

Name of Employer Self-employed Occupation Artist

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1005.00

Date of Receipt 04 / 29 / 2008

Transaction ID: SA11AI.10562

Amount of Each Receipt this Period 1000.00

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

Mailing Address 175 Saint Marks Ave #3

City Brooklyn State NY Zip Code 11238

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

Name of Employer Self-employed Occupation Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 26 / 2008

Transaction ID: SA11AI.10541

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional) ► 1225.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 12

(check only one)

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

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NAME OF COMMITTEE (In Full)
Organic Consumers Fund PAC

A.

Full Name (Last, First, Middle Initial)
Caroline Stoia

Mailing Address 175 Saint Marks Ave #3

City State Zip Code
Brooklyn NY 11238

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-employed Housewife

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 24 / 2008

Transaction ID: SA11AI.10819

Amount of Each Receipt this Period 100.00

B.

Full Name (Last, First, Middle Initial)
James Streamo

Mailing Address 3430 Archdale Dr

City State Zip Code
Raleigh NC 27614-6955

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 10 / 2008

Transaction ID: SA11AI.10673

Amount of Each Receipt this Period 50.00

C.

Full Name (Last, First, Middle Initial)
James Streamo

Mailing Address 3430 Archdale Dr

City State Zip Code
Raleigh NC 27614-6955

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 06 / 07 / 2008

Transaction ID: SA11AI.10910

Amount of Each Receipt this Period 50.00

SUBTOTAL of Receipts This Page (optional) 200.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 12
	<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)
Organic Consumers Fund PAC

A.	Full Name (Last, First, Middle Initial) Steven Weiss	Date of Receipt MM / DD / YYYY 06 / 14 / 2008
	Mailing Address 148 Willow St Apt 3	Transaction ID: SA11AI.10982
	City State Zip Code Brooklyn NY 11201-2258	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer SELF	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) Dayna Weissfeld	Date of Receipt MM / DD / YYYY 05 / 17 / 2008
	Mailing Address 56 N Pine Cr	Transaction ID: SA11AI.10762
	City State Zip Code Bellair FL 33756	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation Indep. Travel Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) Dayna Weissfeld	Date of Receipt MM / DD / YYYY 06 / 14 / 2008
	Mailing Address 56 N Pine Cr	Transaction ID: SA11AI.11022
	City State Zip Code Bellair FL 33756	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
Name of Employer	Occupation Indep. Travel Agent	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional)	▶	650.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 12
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
Organic Consumers Fund PAC

A.

Full Name (Last, First, Middle Initial)
James Zack

Mailing Address 4 Woodland Drive

City State Zip Code
Saratoga Springs NY 12866

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

Name of Employer Occupation
SELF COMPUTER CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	9	/	2	0	0	8

Transaction ID: SA11AI.10426

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	2875.00

**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 11 / 12

<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)
Organic Consumers Fund PAC

A.

Full Name (Last, First, Middle Initial)
Hudson Bay Company of IL

Transaction ID: SB21B.11095

Date of Disbursement

Mailing Address 941 O Street Suite 625

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

City Lincoln State NE Zip Code 68508

Amount of Each Disbursement this Period

15335.31

Purpose of Disbursement
Operating Expenses (Fundraising for PAC)

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Hudson Bay Company of IL

Transaction ID: SB21B.11097

Date of Disbursement

Mailing Address 941 O Street Suite 625

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

City Lincoln State NE Zip Code 68508

Amount of Each Disbursement this Period

3003.80

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

18339.11

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

18339.11

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 12 / 12	
	FOR LINE NUMBER: (check only one)	<input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Organic Consumers Fund PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Hudson Bay Company of IL			Nature of Debt (Purpose): Telephone Fundraising
Mailing Address 941 O Street Suite 625			
City Lincoln	State NE	ZIP Code 68508	

Outstanding Balance Beginning This Period		Transaction ID: SD10.7239	
3691.24			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	3003.80	687.44	

1) SUBTOTALS This Period This Page (optional).....	687.44
2) TOTALS This Period (last page this line number only).....	687.44
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	687.44