

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

ADDRESS (number and street) P.O. Box 1116
 Check if different than previously reported. (ACC) Great Barrington MA 01230

2. **FEC IDENTIFICATION NUMBER** C C00512244 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
MA 01

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

(b) 12-Day **PRE**-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on M M / D D / Y Y Y Y in the State of
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y through M M / D D / Y Y Y Y
04 / 01 / 2012 through 06 / 30 / 2012

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 Jon Rosen
Signature of Treasurer Jon Rosen *[Electronically Filed]* Date M M / D D / Y Y Y Y
07 / 14 / 2012

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Human People for Shein

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	6746.49	17982.48
(b) Total Contribution Refunds (from Line 20(d))	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	6746.49	17982.48
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	6246.00	12012.92
(b) Total Offsets to Operating Expenditures (from Line 14).....	273.14	319.75
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	5972.86	11693.17
8. Cash on Hand at Close of Reporting Period (from Line 27).....	6289.31	
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).....	0.00	

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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Human People for Shein

Report Covering the Period: From: / / To: / /

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized.....	6746.49	17967.48
(iii) TOTAL of contributions from individuals ▶	6746.49	17967.48
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	15.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	6746.49	17982.48
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13. LOANS:		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	273.14	319.75
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	0.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	7019.63	18302.23

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	6246.00	12012.92
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. 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 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	6246.00	12012.92

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	5515.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	7019.63
25. SUBTOTAL (add Line 23 and Line 24).....	12535.31
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	6246.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	6289.31

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 32
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input checked="" type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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

NAME OF COMMITTEE (In Full)
Human People for Shein

A. Full Name (Last, First, Middle Initial)
Amazon.com

Mailing Address P.O. Box 81226

City: Seattle State: WA Zip Code: 98108

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

Name of Employer: _____ Occupation: _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 04 / 09 / 2012

Transaction ID : SA14.4417

Amount of Each Receipt this Period: 232.99

Refund for returned video camera

B. Full Name (Last, First, Middle Initial)
Battery Edge, Inc.

Mailing Address 10381 Double R Blvd

City: Reno State: NV Zip Code: 89521

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

Name of Employer: _____ Occupation: _____

Receipt For: 2012
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt: 04 / 13 / 2012

Transaction ID : SA14.4418

Amount of Each Receipt this Period: 40.15

Refund for returned battery

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

Mailing Address

City: _____ State: _____ Zip Code: _____

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) _____

Election Cycle-to-Date: _____

Date of Receipt

Amount of Each Receipt this Period

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

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

273.14

273.14

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 32
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Apple, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 50 Holyoke Street		Amount of Each Disbursement this Period 31.82 Transaction ID : SB17.4450
City Holyoke State MA Zip Code 01040	Purpose of Disbursement Telephone accessory Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Berkshire Co-Op Market		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 42 Bridge Street		Amount of Each Disbursement this Period 20.53 Transaction ID : SB17.4430
City Great Barrington State MA Zip Code 01230	Purpose of Disbursement Snacks for volunteers Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Big Y Market		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 740 Main Street		Amount of Each Disbursement this Period 104.85 Transaction ID : SB17.4455
City Great Barrington State MA Zip Code 01230	Purpose of Disbursement Food for volunteer party Candidate Name Category/Type 007	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	157.20
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 7 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. BlueHost Web Services		Date of Disbursement M M / D D / Y Y Y Y 04 / 06 / 2012
Mailing Address 1958 South 950 East		Amount of Each Disbursement this Period 96.04 Transaction ID : SB17.4388
City Provo State UT Zip Code 84606	Purpose of Disbursement Domain name services Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. BlueHost Web Services		Date of Disbursement M M / D D / Y Y Y Y 06 / 10 / 2012
Mailing Address 1958 South 950 East		Amount of Each Disbursement this Period 55.96 Transaction ID : SB17.4467
City Provo State UT Zip Code 84606	Purpose of Disbursement Domain name services Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Carr Hardware		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address 256 Main Street		Amount of Each Disbursement this Period 4.23 Transaction ID : SB17.4453
City Great Barrington State MA Zip Code 01230	Purpose of Disbursement Copies of office keys Candidate Name Category/Type 001	
Office Sought: House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	96.04
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 32			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Connolly Printing, Inc.			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012	
Mailing Address 17B Gill Street			Amount of Each Disbursement this Period 1016.02	
City Woburn	State MA	Zip Code 01801	Transaction ID : SB17.4398	
Purpose of Disbursement Printing		006 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Cumberland Farms			Date of Disbursement M M / D D / Y Y Y Y 04 / 02 / 2012	
Mailing Address 140 Main Street			Amount of Each Disbursement this Period 38.65	
City Great Barrington	State MA	Zip Code 01230	Transaction ID : SB17.4386	
Purpose of Disbursement Fuel		002 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. Cumberland Farms			Date of Disbursement M M / D D / Y Y Y Y 04 / 10 / 2012	
Mailing Address 140 Main Street			Amount of Each Disbursement this Period 46.59	
City Great Barrington	State MA	Zip Code 01230	Transaction ID : SB17.4391	
Purpose of Disbursement Fuel		001 Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	1101.26
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 9 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Cumberland Farms		Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2012
Mailing Address 140 Main Street		Amount of Each Disbursement this Period 47.44 Transaction ID : SB17.4420
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Cumberland Farms		Date of Disbursement M M / D D / Y Y Y Y 04 / 27 / 2012
Mailing Address 140 Main Street		Amount of Each Disbursement this Period 48.10 Transaction ID : SB17.4410
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Cumberland Farms		Date of Disbursement M M / D D / Y Y Y Y 05 / 01 / 2012
Mailing Address 140 Main Street		Amount of Each Disbursement this Period 27.03 Transaction ID : SB17.4422
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	122.57
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Cumberland Farms		Date of Disbursement M M / D D / Y Y Y Y 05 / 07 / 2012
Mailing Address 140 Main Street		Amount of Each Disbursement this Period 36.10
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Fuel	Transaction ID : SB17.4429
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Cumberland Farms		Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 140 Main Street		Amount of Each Disbursement this Period 44.79
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Fuel	Transaction ID : SB17.4433
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. Cumberland Farms		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 140 Main Street		Amount of Each Disbursement this Period 36.85
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Fuel	Transaction ID : SB17.4464
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	117.74
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Cumberland Farms			Date of Disbursement M M / D D / Y Y Y Y 06 / 17 / 2012
Mailing Address 140 Main Street			Amount of Each Disbursement this Period 10.00 Transaction ID : SB17.4477
City Great Barrington	State MA	Zip Code 01230	
Purpose of Disbursement Fuel	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) B. Esselon Cafe			Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 99 Russell Street			Amount of Each Disbursement this Period 16.31 Transaction ID : SB17.4447
City Hadley	State MA	Zip Code 01035	
Purpose of Disbursement Meals	Candidate Name		Category/ Type 002
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

Full Name (Last, First, Middle Initial) c. Fuel Coffee Shop			Date of Disbursement M M / D D / Y Y Y Y 05 / 08 / 2012
Mailing Address 286 Main Street			Amount of Each Disbursement this Period 78.01 Transaction ID : SB17.4432
City Great Barrington	State MA	Zip Code 01230	
Purpose of Disbursement Volunteer coffee/food	Candidate Name		Category/ Type 007
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: _____ District: _____			

SUBTOTAL of Disbursements This Page (optional).....	104.32
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Great Barrington Bagel Company		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2012
Mailing Address 777 South Main Street		Amount of Each Disbursement this Period 17.01 Transaction ID : SB17.4405
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Food for volunteers	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Great Barrington Bagel Company		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2012
Mailing Address 777 South Main Street		Amount of Each Disbursement this Period 14.51 Transaction ID : SB17.4428
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Food for volunteers	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Guido's Fresh Marketplace		Date of Disbursement M M / D D / Y Y Y Y 04 / 29 / 2012
Mailing Address 760 Main Street		Amount of Each Disbursement this Period 10.77 Transaction ID : SB17.4411
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Volunteer snacks	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	42.29
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Gulf Express - Blandford		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2012
Mailing Address Mile Marker 29.1 Mass Pike		Amount of Each Disbursement this Period 48.38
City Blandford	State MA	
Zip Code 01008	Purpose of Disbursement Fuel	Transaction ID : SB17.4404
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Gulf Express - Blandford		Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2012
Mailing Address Mile Marker 29.1 Mass Pike		Amount of Each Disbursement this Period 5.33
City Blandford	State MA	
Zip Code 01008	Purpose of Disbursement Volunteer snacks	Transaction ID : SB17.4434
Candidate Name	007 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Gulf Express - Blandford		Date of Disbursement M M / D D / Y Y Y Y 06 / 08 / 2012
Mailing Address Mile Marker 29.1 Mass Pike		Amount of Each Disbursement this Period 39.39
City Blandford	State MA	
Zip Code 01008	Purpose of Disbursement Fuel	Transaction ID : SB17.4466
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	93.10
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 14 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Gulf Express - Blandford			Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2012	
Mailing Address Mile Marker 29.1 Mass Pike			Amount of Each Disbursement this Period 40.28	
City Blandford	State MA	Zip Code 01008	Transaction ID : SB17.4473	
Purpose of Disbursement Fuel		Category/ Type 002		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. Gypsy Joynt Restaurant			Date of Disbursement M M / D D / Y Y Y Y 04 / 18 / 2012	
Mailing Address 389 Stockbridge Road			Amount of Each Disbursement this Period 23.24	
City Great Barrington	State MA	Zip Code 01230	Transaction ID : SB17.4397	
Purpose of Disbursement Meals		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) c. Gypsy Joynt Restaurant			Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012	
Mailing Address 389 Stockbridge Road			Amount of Each Disbursement this Period 21.38	
City Great Barrington	State MA	Zip Code 01230	Transaction ID : SB17.4409	
Purpose of Disbursement Meals		Category/ Type 001		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	84.90
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. Hot Table		M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 1500 Main Street		Amount of Each Disbursement this Period
City Springfield	State MA	Zip Code 01115
Purpose of Disbursement Meals	Category/ Type 002	Transaction ID : SB17.4415
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. Hot Table		M M / D D / Y Y Y Y 06 / 01 / 2012
Mailing Address 1500 Main Street		Amount of Each Disbursement this Period
City Springfield	State MA	Zip Code 01115
Purpose of Disbursement Meals	Category/ Type 002	Transaction ID : SB17.4462
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. Intuit Quickbooks Online		M M / D D / Y Y Y Y 04 / 10 / 2012
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period
City Mountain View	State CA	Zip Code 94043
Purpose of Disbursement Accounting services	Category/ Type 001	Transaction ID : SB17.4393
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....	52.07
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 32		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Intuit Quickbooks Online		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 20.04 Transaction ID : SB17.4437
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Accounting services Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) B. Intuit Quickbooks Online		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 2632 Marine Way		Amount of Each Disbursement this Period 20.04 Transaction ID : SB17.4472
City Mountain View State CA Zip Code 94043	Purpose of Disbursement Accounting services Candidate Name Category/Type 001	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) c. Kathleen Jackson		Date of Disbursement M M / D D / Y Y Y Y 05 / 17 / 2012
Mailing Address 87 River Street		Amount of Each Disbursement this Period 76.42 Transaction ID : SB17.4444
City Great Barrington State MA Zip Code 01230	Purpose of Disbursement Fuel expense reimbursement Candidate Name Category/Type 002	
Office Sought: House Senate President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	

SUBTOTAL of Disbursements This Page (optional).....	116.50
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 17 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Kateri Kosek		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 43A Dublin Road		Amount of Each Disbursement this Period 20.00 Transaction ID : SB17.4468
City Falls Village	State CT Zip Code 06031	
Purpose of Disbursement Fuel reimbursement	Category/Type 002	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Kwik Print		Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2012
Mailing Address 35 Bridge Street		Amount of Each Disbursement this Period 49.94 Transaction ID : SB17.4408
City Great Barrington	State MA Zip Code 01230	
Purpose of Disbursement Copying	Category/Type 001	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Manhattan Pizza Company		Date of Disbursement M M / D D / Y Y Y Y 05 / 29 / 2012
Mailing Address 490 South Main Street		Amount of Each Disbursement this Period 101.97 Transaction ID : SB17.4457
City Great Barrington	State MA Zip Code 01230	
Purpose of Disbursement Pizza for volunteer party	Category/Type 007	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	171.97
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Martin's Restaurant		Date of Disbursement M M / D D / Y Y Y Y 06 / 06 / 2012
Mailing Address 49 Railroad Street		Amount of Each Disbursement this Period 25.19 Transaction ID : SB17.4465
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Meals	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Massachusetts Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 77 Summer Street, 10th Floor		Amount of Each Disbursement this Period 75.00 Transaction ID : SB17.4413
City Boston	State MA	
Zip Code 02110	Purpose of Disbursement Convention fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Massachusetts Democratic Party		Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 77 Summer Street, 10th Floor		Amount of Each Disbursement this Period 100.00 Transaction ID : SB17.4446
City Boston	State MA	
Zip Code 02110	Purpose of Disbursement Mailing list	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	200.19
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Mobil Express - Lee			Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012		
Mailing Address 241 Main Street			Amount of Each Disbursement this Period 40.57		
City Lee	State MA	Zip Code 01238	Transaction ID : SB17.4441		
Purpose of Disbursement Fuel		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. Mobil Express - Lee			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012		
Mailing Address 241 Main Street			Amount of Each Disbursement this Period 39.74		
City Lee	State MA	Zip Code 01238	Transaction ID : SB17.4476		
Purpose of Disbursement Fuel		Category/ Type 002			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) c. Morrell, LLC			Date of Disbursement M M / D D / Y Y Y Y 04 / 01 / 2012		
Mailing Address 94 West Avenue			Amount of Each Disbursement this Period 600.00		
City Great Barrington	State MA	Zip Code 01230	Transaction ID : SB17.4382		
Purpose of Disbursement Office rent		Category/ Type 001			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	680.31
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 20 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Morrell, LLC		Date of Disbursement MM / DD / YYYY 04 / 01 / 2012
Mailing Address 94 West Avenue		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.4384
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Office rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Morrell, LLC		Date of Disbursement MM / DD / YYYY 06 / 01 / 2012
Mailing Address 94 West Avenue		Amount of Each Disbursement this Period 600.00 Transaction ID : SB17.4461
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Office rent	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Naji's Restaurant		Date of Disbursement MM / DD / YYYY 06 / 27 / 2012
Mailing Address 401 Stockbridge Road		Amount of Each Disbursement this Period 17.01 Transaction ID : SB17.4482
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Meals	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	1217.01
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 21 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 04 / 11 / 2012
Mailing Address 1100 South Hope St. Suite 1115		Amount of Each Disbursement this Period 70.00 Transaction ID : SB17.4395
City Los Angeles State CA Zip Code 90015	Purpose of Disbursement Web and voter file services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1100 South Hope St. Suite 1115		Amount of Each Disbursement this Period 61.00 Transaction ID : SB17.4438
City Los Angeles State CA Zip Code 90015	Purpose of Disbursement Web and voter file services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. NationBuilder		Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2012
Mailing Address 1100 South Hope St. Suite 1115		Amount of Each Disbursement this Period 61.00 Transaction ID : SB17.4471
City Los Angeles State CA Zip Code 90015	Purpose of Disbursement Web and voter file services Candidate Name Category/Type 001	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	192.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Northern Berkshire Community Coalition			Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2012
Mailing Address 61 Main St # 218			Amount of Each Disbursement this Period 90.00 Transaction ID : SB17.4474
City North Adams	State MA	Zip Code 01247	
Purpose of Disbursement Tickets to luncheon event		Category/ Type 001	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) B. O'Connell's Exxon Mobil			Date of Disbursement M M / D D / Y Y Y Y 05 / 22 / 2012
Mailing Address 11 South Street			Amount of Each Disbursement this Period 46.65 Transaction ID : SB17.4449
City Stockbridge	State MA	Zip Code 01262	
Purpose of Disbursement Fuel		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) c. O'Connell's Exxon Mobil			Date of Disbursement M M / D D / Y Y Y Y 05 / 30 / 2012
Mailing Address 11 South Street			Amount of Each Disbursement this Period 43.31 Transaction ID : SB17.4459
City Stockbridge	State MA	Zip Code 01262	
Purpose of Disbursement Fuel		Category/ Type 002	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....	179.96
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 32		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. O'Connell's Exxon Mobil		Date of Disbursement M M / D D / Y Y Y Y 06 / 25 / 2012
Mailing Address 11 South Street		Amount of Each Disbursement this Period 41.62 Transaction ID : SB17.4480
City Stockbridge	State MA	
Zip Code 01262	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PayPal		Date of Disbursement M M / D D / Y Y Y Y 04 / 30 / 2012
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 26.64 Transaction ID : SB17.4416
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Credit card processing fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. PayPal		Date of Disbursement M M / D D / Y Y Y Y 05 / 31 / 2012
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 33.37 Transaction ID : SB17.4460
City San Jose	State CA	
Zip Code 95131	Purpose of Disbursement Credit card processing fees	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	101.63
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 24 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. PayPal		Date of Disbursement M M / D D / Y Y Y Y 06 / 30 / 2012
Mailing Address 2211 North First Street		Amount of Each Disbursement this Period 56.65 Transaction ID : SB17.4489
City San Jose State CA Zip Code 95131	Purpose of Disbursement Credit card processing fees 001 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Pride Fuel - Springfield		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 1211 E. Columbus Avenue		Amount of Each Disbursement this Period 46.23 Transaction ID : SB17.4435
City Springfield State MA Zip Code 01105	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. PrintGlobe, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 23 / 2012
Mailing Address 4115 Freidrich Lane, Suite 200		Amount of Each Disbursement this Period 340.00 Transaction ID : SB17.4451
City Austin State TX Zip Code 78744	Purpose of Disbursement Printing 006 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	442.88
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 32		
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21			

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. PrintGlobe, Inc.		Date of Disbursement MM / DD / YYYY 06 / 18 / 2012
Mailing Address 4115 Freidrich Lane, Suite 200		Amount of Each Disbursement this Period 53.00 Transaction ID : SB17.4479
City Austin State TX Zip Code 78744	Purpose of Disbursement Printing 006 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Shell Fuel		Date of Disbursement MM / DD / YYYY 05 / 02 / 2012
Mailing Address 73 Columbia Street		Amount of Each Disbursement this Period 45.57 Transaction ID : SB17.4423
City Adams State MA Zip Code 01220	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Shell Fuel		Date of Disbursement MM / DD / YYYY 06 / 27 / 2012
Mailing Address 73 Columbia Street		Amount of Each Disbursement this Period 33.54 Transaction ID : SB17.4484
City Adams State MA Zip Code 01220	Purpose of Disbursement Fuel 002 Category/Type	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	132.11
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 26 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Staples, Inc.		Date of Disbursement MM / DD / YYYY 04 / 10 / 2012
Mailing Address 740 Main Street		Amount of Each Disbursement this Period 99.18 Transaction ID : SB17.4392
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Staples, Inc.		Date of Disbursement MM / DD / YYYY 04 / 13 / 2012
Mailing Address 740 Main Street		Amount of Each Disbursement this Period 72.62 Transaction ID : SB17.4419
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples, Inc.		Date of Disbursement MM / DD / YYYY 04 / 14 / 2012
Mailing Address 740 Main Street		Amount of Each Disbursement this Period 21.25 Transaction ID : SB17.4396
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	99.18
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 27 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Staples, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 20 / 2012
Mailing Address 740 Main Street		Amount of Each Disbursement this Period 20.79 Transaction ID : SB17.4402
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Staples, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 21 / 2012
Mailing Address 740 Main Street		Amount of Each Disbursement this Period 24.97 Transaction ID : SB17.4403
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Staples, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012
Mailing Address 740 Main Street		Amount of Each Disbursement this Period 20.19 Transaction ID : SB17.4425
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Office supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	65.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 32		
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Staples, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 04 / 2012
Mailing Address 740 Main Street		Amount of Each Disbursement this Period 999,999.99 51.80
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Copying	Transaction ID : SB17.4426
Candidate Name	001 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. Stop & Shop - Chicopee		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 672 Memorial Drive		Amount of Each Disbursement this Period 999,999.99 27.15
City Chicopee	State MA	
Zip Code 01020	Purpose of Disbursement Fuel	Transaction ID : SB17.4487
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) c. Subway Sandwiches and Salads		Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2012
Mailing Address 645 Memorial Drive		Amount of Each Disbursement this Period 999,999.99 11.37
City Chicopee	State MA	
Zip Code 01020	Purpose of Disbursement Meals	Transaction ID : SB17.4485
Candidate Name	002 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	999,999.99 90.32
TOTAL This Period (last page this line number only).....	999,999.99

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 05 / 2012
Mailing Address 222 Main Street		Amount of Each Disbursement this Period 9.00 Transaction ID : SB17.4387
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 19 / 2012
Mailing Address 222 Main Street		Amount of Each Disbursement this Period 5.30 Transaction ID : SB17.4400
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 04 / 25 / 2012
Mailing Address 222 Main Street		Amount of Each Disbursement this Period 5.30 Transaction ID : SB17.4407
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	19.60
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 11 / 2012
Mailing Address 222 Main Street		Amount of Each Disbursement this Period 39.00 Transaction ID : SB17.4470
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Post office box fee	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2012
Mailing Address 222 Main Street		Amount of Each Disbursement this Period 9.00 Transaction ID : SB17.4439
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 14 / 2012
Mailing Address 222 Main Street		Amount of Each Disbursement this Period 18.95 Transaction ID : SB17.4440
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	66.95
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 32			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Date of Disbursement M M / D D / Y Y Y Y 05 / 24 / 2012
Mailing Address 222 Main Street		Amount of Each Disbursement this Period 9.00 Transaction ID : SB17.4454
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Postage	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Verizon Wireless, Inc.		Date of Disbursement M M / D D / Y Y Y Y 04 / 07 / 2012
Mailing Address PO Box 4003		Amount of Each Disbursement this Period 181.69 Transaction ID : SB17.4390
City Acworth	State GA	
Zip Code 30101	Purpose of Disbursement Telephone service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. Verizon Wireless, Inc.		Date of Disbursement M M / D D / Y Y Y Y 05 / 15 / 2012
Mailing Address PO Box 4003		Amount of Each Disbursement this Period 152.02 Transaction ID : SB17.4443
City Acworth	State GA	
Zip Code 30101	Purpose of Disbursement Telephone service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	342.71
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 32 OF 32	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Human People for Shein

Full Name (Last, First, Middle Initial) A. Verizon Wireless, Inc.		Date of Disbursement M M / D D / Y Y Y Y 06 / 02 / 2012
Mailing Address PO Box 4003		Amount of Each Disbursement this Period 106.16 Transaction ID : SB17.4463
City Acworth	State GA	
Zip Code 30101	Purpose of Disbursement Telephone service	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Xtramart Exxon Mobil		Date of Disbursement M M / D D / Y Y Y Y 05 / 06 / 2012
Mailing Address 696 South Main Street		Amount of Each Disbursement this Period 49.14 Transaction ID : SB17.4427
City Great Barrington	State MA	
Zip Code 01230	Purpose of Disbursement Fuel	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	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 type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	155.30
TOTAL This Period (last page this line number only).....	6246.00