

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) HUMAN RIGHTS CAMPAIGN PAC	FEC IDENTIFICATION NUMBER C C00235853
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Gag Wear

Date
M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 4

Mailing Address
1650 Indian Brook Way Ste 3B

Amount
500.00

City State Zip Code
Norcross GA 30093-2646

Transaction ID: D3700

Purpose of Expenditure Category/Type
Merchandise

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
George W. Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
126413.36

Disbursement For: Primary General 2004
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
Go West Couriers

Date
M M / D D / Y Y Y Y
0 8 / 3 1 / 2 0 0 4

Mailing Address
208 Anita Street, NE
Washington, DC 20002

Amount
42.00

City State Zip Code
Washington DC 20002

Transaction ID: D3746

Purpose of Expenditure Category/Type
Courier Service

Office Sought: House State: _____
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
George W. Bush

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
126413.36

Disbursement For: Primary General 2004
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	542.00
(b) SUBTOTAL of Unitemized Independent Expenditures	0.00
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature _____ Date M M / D D / Y Y Y Y