

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation HUMANE SOCIETY LEGISLATIVE FUND		3. FEC Identification Number <div> <div>C</div> <div>C90009358</div> </div>
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2100 L Street NW Suite 310		
(c) City, State and ZIP Code WASHINGTON DC 20037		
2.	Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	Individual filers only Name of Employer N	Occupation

4. TYPE OF REPORT (check appropriate boxes):

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year-End Report

☒ 24-Hour Report

☐ 48-Hour Report

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

<div><div>M M</div><div>10</div></div>	/	<div><div>D D D</div><div>18</div></div>	/	<div><div>Y Y Y Y Y</div><div>2012</div></div>
THROUGH				
<div><div>M M</div><div>10</div></div>	/	<div><div>D D D</div><div>19</div></div>	/	<div><div>Y Y Y Y Y</div><div>2012</div></div>

6. TOTAL CONTRIBUTIONS	0
7. TOTAL INDEPENDENT EXPENDITURES	154077.91

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 any political party committee or its agent. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE _____

[Electronically Filed]

Janet Piatetski

Janet Piatetski

10/19/2012

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 20
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 18 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 24.16	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Transaction ID : 2412606
Name of Federal Candidate Supported or Opposed by Expenditure: Anthony A Strickland		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 71.85		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Sahar Eshghi		Date MM / DD / YYYY 10 / 18 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 6.08	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Transaction ID : 2412607
Name of Federal Candidate Supported or Opposed by Expenditure: Anthony A Strickland		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 77.93		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Candidate Command, LLC		Date MM / DD / YYYY 10 / 18 / 2012	
Mailing Address 1831 NW Vivion Suite 101		Amount 45593	
City Riverside	State MO	Zip Code 64150	
Purpose of Expenditure Printing		Category/ Type 006	Transaction ID : 2412608
Name of Federal Candidate Supported or Opposed by Expenditure: Anthony A Strickland		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 45670.93		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		45623.24	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Axiom Strategies, LLC		Date MM / DD / YYYY 10 / 18 / 2012	
Mailing Address 1251 NW Briarcliff Pkwy Ste 85		Amount 4686.83	
City Kansas City	State MO	Zip Code 64116	
Purpose of Expenditure Phone poll		Category/ Type 003	Transaction ID : 2412609
Name of Federal Candidate Supported or Opposed by Expenditure: Anthony A Strickland		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 50357.76		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Sahar Eshghi		Date MM / DD / YYYY 10 / 18 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 4.05	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Transaction ID : 2412603
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 491640.16		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee NRI, Inc.		Date MM / DD / YYYY 10 / 18 / 2012	
Mailing Address 11400 Rockville Pike Suite 820		Amount 1100	
City Rockville	State MD	Zip Code 20852	
Purpose of Expenditure Staff Time		Category/ Type 001	Transaction ID : 2412604
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought 492740.16		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		5790.88	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date MM / DD / YYYY 10 / 18 / 2012	
Mailing Address 606A N. Talbot St. Suite 303		Amount 1250	
City St. Michaels	State MD	Zip Code 21663	Transaction ID : 2412605
Purpose of Expenditure Advertising	Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 493990.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 48.32	
City Washington	State DC	Zip Code 20037	Transaction ID : 2412651
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 494038.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Wayne Pacelle		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 34.35	
City Washington	State DC	Zip Code 20037	Transaction ID : 2412652
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 494072.83		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ➤

1332.67

(b) SUBTOTAL of Unitemized Independent Expenditures..... ➤

(c) TOTAL Independent Expenditures ➤
(carry total from last page forward to Line 7)

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Sara Amundson		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 18.24	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 494091.07		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Dane Waters		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 5.21	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 494096.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Heather Sullivan		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 15.27	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 494111.55		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) **SUBTOTAL** of Itemized Independent Expenditures..... ➤

38.72

(b) **SUBTOTAL** of Unitemized Independent Expenditures..... ➤(c) **TOTAL** Independent Expenditures ➤
(carry total from last page forward to Line 7)

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Scott Tucker		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 8.27	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 494119.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 606A N. Talbot St. Suite 303		Amount 2368.64	
City St. Michaels	State MD	Zip Code 21663	
Purpose of Expenditure Advertising		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 496488.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 606A N. Talbot St. Suite 303		Amount 15000	
City St. Michaels	State MD	Zip Code 21663	
Purpose of Expenditure Advertising		Category/ Type 004	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Steve King		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 511488.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		17376.91	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 12.08	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		124.06	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412619			
Full Name (Last, First, Middle Initial) of Payee Sara Amundson		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 30.4	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		154.46	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412620			
Full Name (Last, First, Middle Initial) of Payee List America		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 5151 Wisconsin Ave. NW Suite 400		Amount 13248.68	
City Washington	State DC	Zip Code 20016	
Purpose of Expenditure Solicitation & Fundraising Exp		Category/ Type	003
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		13403.14	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412621			
(a) SUBTOTAL of Itemized Independent Expenditures.....		13291.16	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

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

List America

Date

M M / D D / Y Y Y Y Y
10 / 19 / 2012

Mailing Address

5151 Wisconsin Ave. NW

Suite 400

Amount

4035.92

Transaction ID : 2412622

Purpose of Expenditure

Solicitation & Fundraising Exp

Category/
Type

003

Office Sought:

☐ House

State: WI

☒ Senate

District: 00

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tammy Baldwin

Calendar Year-To-Date Per Election
for Office Sought

17439.06

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

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

Winning Mark

Date

M M / D D / Y Y Y Y Y
10 / 19 / 2012

Mailing Address

1220 SW Morrison St

#910

Amount

4857.59

Transaction ID : 2412623

Purpose of Expenditure

Mass Mailings

Category/
Type

006

Office Sought:

☐ House

State: WI

☒ Senate

District: 00

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tammy Baldwin

Calendar Year-To-Date Per Election
for Office Sought

22296.65

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

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

Axiom Strategies, LLC

Date

M M / D D / Y Y Y Y Y
10 / 18 / 2012

Mailing Address

1251 NW Briarcliff Pkwy

Ste 85

Amount

4085.93

Transaction ID : 2412610

Purpose of Expenditure

Phone poll

Category/
Type

003

Office Sought:

☒ House

State: PA

☐ Senate

District: 08

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Michael G Fitzpatrick

Calendar Year-To-Date Per Election
for Office Sought

23392.18

Disbursement For: ☐ Primary☒ General2012 ☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

12979.44

(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶

(c) TOTAL Independent Expenditures ▶
(carry total from last page forward to Line 7)

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 48.32	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		183.61	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412614			
Full Name (Last, First, Middle Initial) of Payee Sara Amundson		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 6.08	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		189.69	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412615			
Full Name (Last, First, Middle Initial) of Payee List America		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 5151 Wisconsin Ave. NW Suite 400		Amount 3565.37	
City Washington	State DC	Zip Code 20016	
Purpose of Expenditure Solicitation & Fundraising Exp		Category/ Type	003
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		3755.06	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412616			
(a) SUBTOTAL of Itemized Independent Expenditures.....		3619.77	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee List America		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 5151 Wisconsin Ave. NW Suite 400		Amount 11839.25	
City Washington	State DC	Zip Code 20016	Transaction ID : 2412617
Purpose of Expenditure Solicitation & Fundraising Exp	Category/ Type 003	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 15594.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Winning Mark		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 1220 SW Morrison St #910		Amount 15565.21	
City Portland	State OR	Zip Code 97205	Transaction ID : 2412618
Purpose of Expenditure Mass Mailings	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31159.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 60.41	
City Washington	State DC	Zip Code 20037	Transaction ID : 2412640
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31219.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ➤

27464.87

(b) SUBTOTAL of Unitemized Independent Expenditures..... ➤

(c) TOTAL Independent Expenditures ➤
(carry total from last page forward to Line 7)

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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Wayne Pacelle		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 17.18	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31237.11		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee John Balzar		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 9.7	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31246.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Scott Tucker		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 5.51	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31252.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) **SUBTOTAL** of Itemized Independent Expenditures..... ➤

32.39

(b) **SUBTOTAL** of Unitemized Independent Expenditures..... ➤(c) **TOTAL** Independent Expenditures ➤
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 12 OF 20
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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 12.08	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		31264.4	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412644			
Full Name (Last, First, Middle Initial) of Payee Sara Amundson		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 6.08	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		31270.48	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412645			
Full Name (Last, First, Middle Initial) of Payee Wayne Pacelle		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 17.18	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Calendar Year-To-Date Per Election for Office Sought		31287.66	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____			
Transaction ID : 2412646			
(a) SUBTOTAL of Itemized Independent Expenditures.....		35.34	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 13 OF 20
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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee
Dane Waters

Date

MM / DD / YYYY
10 / 19 / 2012Mailing Address
2100 L Street NW
Suite 310

Amount

5.21

Transaction ID : 2412647

Purpose of Expenditure
Staff TimeCategory/
Type 001Office Sought: ☐ House State: AZ
☒ Senate District: 00
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard CarmonaCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 31292.87Disbursement For: ☐ Primary ☒ General
2012
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Heather Sullivan

Date

MM / DD / YYYY
10 / 19 / 2012Mailing Address
2100 L Street NW
Suite 310

Amount

19.09

Transaction ID : 2412648

Purpose of Expenditure
Staff TimeCategory/
Type 001Office Sought: ☐ House State: AZ
☒ Senate District: 00
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard CarmonaCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 31311.96Disbursement For: ☐ Primary ☒ General
2012
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Sahar Eshghi

Date

MM / DD / YYYY
10 / 19 / 2012Mailing Address
2100 L Street NW
Suite 310

Amount

2.03

Transaction ID : 2412649

Purpose of Expenditure
Staff TimeCategory/
Type 001Office Sought: ☐ House State: AZ
☒ Senate District: 00
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Richard CarmonaCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 31313.99Disbursement For: ☐ Primary ☒ General
2012
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

26.33

(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶

(c) TOTAL Independent Expenditures ▶
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 14 OF 20
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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Scott Tucker		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 5.51	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Richard Carmona		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31319.5		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 12.08	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Christopher S Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 125.24		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 60.41	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Christopher S Murphy		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 185.65		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) **SUBTOTAL** of Itemized Independent Expenditures..... ➤

78.00

(b) **SUBTOTAL** of Unitemized Independent Expenditures..... ➤(c) **TOTAL** Independent Expenditures ➤
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 15 OF 20
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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee List America		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 5151 Wisconsin Ave. NW Suite 400		Amount 12293.36	
City Washington	State DC	Zip Code 20016	
Purpose of Expenditure Solicitation & Fundraising Exp		Category/ Type 003	Transaction ID : 2412626
Name of Federal Candidate Supported or Opposed by Expenditure: Christopher S Murphy		Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
12479.01			

Full Name (Last, First, Middle Initial) of Payee List America		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 5151 Wisconsin Ave. NW Suite 400		Amount 4035.92	
City Washington	State DC	Zip Code 20016	
Purpose of Expenditure Solicitation & Fundraising Exp		Category/ Type 003	Transaction ID : 2412627
Name of Federal Candidate Supported or Opposed by Expenditure: Christopher S Murphy		Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
16514.93			

Full Name (Last, First, Middle Initial) of Payee Winning Mark		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 1220 SW Morrison St #910		Amount 4857.59	
City Portland	State OR	Zip Code 97205	
Purpose of Expenditure Mass Mailings		Category/ Type 006	Transaction ID : 2412628
Name of Federal Candidate Supported or Opposed by Expenditure: Christopher S Murphy		Office Sought: <input type="checkbox"/> House State: CT <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
21372.52			

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	21186.87
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures ▶ (carry total from last page forward to Line 7)	

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 16 OF 20
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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 24.16	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		24.16	
Full Name (Last, First, Middle Initial) of Payee Wayne Pacelle		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 17.18	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type	001
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		41.34	
Full Name (Last, First, Middle Initial) of Payee Riester Public Affairs LLC		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 802 North 3rd Avenue		Amount 5000	
City Phoenix	State AZ	Zip Code 85003	
Purpose of Expenditure Advertising		Category/ Type	004
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		5041.34	
(a) SUBTOTAL of Itemized Independent Expenditures.....		5041.34	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 17 OF 20
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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 12.08	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5053.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Sara Amundson		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 6.08	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5059.5		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Wayne Pacelle		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 17.18	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5076.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) **SUBTOTAL** of Itemized Independent Expenditures..... ➤

35.34

(b) **SUBTOTAL** of Unitemized Independent Expenditures..... ➤(c) **TOTAL** Independent Expenditures ➤
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 18 OF 20
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Dane Waters		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 5.21	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5081.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Heather Sullivan		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 19.09	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5100.98		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Sahar Eshghi		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 2.03	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5103.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) **SUBTOTAL** of Itemized Independent Expenditures..... ➤

26.33

(b) **SUBTOTAL** of Unitemized Independent Expenditures..... ➤(c) **TOTAL** Independent Expenditures ➤
(carry total from last page forward to Line 7)

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 19 OF 20
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NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Scott Tucker		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 5.51	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5108.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 60.41	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5168.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Wayne Pacelle		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 17.18	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5186.11		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures.....		83.10	
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures (carry total from last page forward to Line 7)			

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ITEMIZED INDEPENDENT EXPENDITURESPAGE 20 OF 20
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee John Balzar		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 9.7	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5195.81		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Scott Tucker		Date MM / DD / YYYY 10 / 19 / 2012	
Mailing Address 2100 L Street NW Suite 310		Amount 5.51	
City Washington	State DC	Zip Code 20037	
Purpose of Expenditure Staff Time		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: AZ <input checked="" type="checkbox"/> Senate District: 00 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 5201.32		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures 15,21			
(b) SUBTOTAL of Unitemized Independent Expenditures.....			
(c) TOTAL Independent Expenditures 154077.91 (carry total from last page forward to Line 7)			