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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

	_		
(a) Name of Individual, Organization or Corporation HUMANE SOCIETY LEGISLATIVE FUND			
(b) Address (number and street) check if different than previously reported 2100 L STREET NW SUITE 310			
(c) City, State and ZIP Code			
	3. FEC Identification Number		
WASHINGTON DC 20037			
2. Occupation and Name of Employer (for Individual Filers Only)	C c90009358		
4. TYPE OF REPORT (check appropriate boxes):			
(a) April 15 Quarterly Report			
July 15 Quarterly Report 24-Hour Report			
October 15 Quarterly Report 48-Hour Report			
January 31 Year-End Report			
b) Is this Report an amendment? X No Yes, it amends the report filed on	M / D D / Y Y Y Y		
5. COVERING PERIOD: FROM 02 / 27 / 2014			
THROUGH 05 27 2014			
6. TOTAL CONTRIBUTIONS	0		
7. TOTAL INDEPENDENT EXPENDITURES	42161.26		
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.			
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE [Electronic content of the	DATE ctronically Filed]		
JANET PIATESKI	05/29/2014		
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.			

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 4 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) HUMANE SOCIETY LEGISLATIVE FUND	
TOWARE SOCIETY ELOISEATIVE FORD	
Full Name (Last, First, Middle Initial) of Payee	
Heather Gorn	Date of Public Distribution/Dissemination
Mailing Addraga	06 02 2014
2100 L Street NW Suite 310	Amount
City State Zip Code	
Washington DC 20037	3.93 Transaction ID : 20140060
Purpose of Expenditure Category/ Type 001	Office Sought: House State: CA Senate District: 11
Name of Federal Candidate Supported or Opposed by Expenditure: Mark DeSaulnier	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Heather Gorn	06 02 2014
Mailing Address 2100 L Street NW	
Suite 310	Amount
City State Zip Code	3.93
Washington DC 20037	Transaction ID: 20140061
Purpose of Expenditure Staff Time Category/ Type 001	Office Sought: House State: CA Senate District: 33
Name of Federal Candidate Supported or Opposed by Expenditure: Ted Lieu	President Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination
Heather Gorn	06 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2100 L Street NW	
Suite 310	Amount
City State Zip Code	3.93
Washington DC 20037	Transaction ID : 20140062
Purpose of Expenditure Staff Time Category/ Type 001	Office Sought: House State: CA Senate Signature: 25
Name of Federal Candidate Supported or Opposed by Expenditure:	President District: 25
Anthony A Strickland	Check One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought 41797.34	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	11.79
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	······>

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 4 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) HUMANE SOCIETY LEGISLATIVE FUND Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Sara Amundson 06 09 2014 Mailing Address 2100 L Street NW Amount Suite 310 Zip Code City State 13.77 Washington DC 20037 Transaction ID: 20140063 ۷A Purpose of Expenditure Office Sought: X House Category/ State: 001 Staff Time Type Senate 08 District: President Name of Federal Candidate Supported or Opposed by Expenditure: Donald S Beyer X Support Check One: Oppose Disbursement For: Primary 2014 General Calendar Year-To-Date Per Election 165.78 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Michael Markarian 06 09 2014 Mailing Address 2100 L Street NW Suite 310 Amount City State Zip Code 13.46 Washington DC 20037 Transaction ID: 20140064 VA Purpose of Expenditure Office Sought: House Category/ State: 001 Staff Time Type Senate 08 District: President Name of Federal Candidate Supported or Opposed by Expenditure: Donald S Beyer Check One: X Support Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 179.24 2014 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination Martin Montorfano 2014 06 09 Mailing Address 2101 L Street NW Amount Suite 310 State Zip Code City 61.09 DC 20037 Washington Transaction ID: 20140065 Purpose of Expenditure Office Sought: VA House Category/ State: 001 Staff Time Type Senate 80 District: President Name of Federal Candidate Supported or Opposed by Expenditure: Donald S Beyer X Support Check One: Oppose Disbursement For: Primary 2014 General Calendar Year-To-Date Per Election 240.33 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 88.32 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 4 OF 4 FOR LINE 7 OF FORM 5

NAT OF THE (1 T II)		<u> </u>
AME OF FILER (In Full) HUMANE SOCIETY LEGISLATIVE FU	JND	
Full Name (Last First Middle Initia	all of Payer	
Full Name (Last, First, Middle Initia Lara Provance	al) of Payee	Date of Public Distribution/Dissemination
Mailing Addross		06 09 2014
2101 L Street NV Suite 311	N	Amount
City	State Zip Code	
Washington	DC 20037	53.45 Transaction ID : 20140066
Purpose of Expenditure	Category/	Office Sought: X House State: VA
Staff Time	Type 001	Senate District: 08
Name of Federal Candidate Suppo Donald S Beyer	orted or Opposed by Expenditure:	President Check One: Support Oppose
Calendar Year-To-Date Per El for Office S	202.70	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initia	al) of Payee	Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City	State Zip Code	Amount
City	State Zip Gode	
Purpose of Expenditure	Category/ Type	Office Sought: House State:
Name of Federal Candidate Suppo		District:
TNAME OF Federal Candidate Suppo	orted of Opposed by Experialities.	Check One: Support Oppose
Calendar Year-To-Date Per Ele	ection	Disbursement For: Primary General
for Office So		Other (specify)
Full Name (Last, First, Middle Initia	al) of Payee	Date of Public Distribution/Dissemination
		M - M / D - D / Y - Y - Y
Mailing Address		
		Amount
City	State Zip Code	
Purpose of Expenditure	Category/	Office Sought: House State:
	Type	Senate District:
Name of Federal Candidate Suppo	orted or Opposed by Expenditure:	President
		Check One: Support Oppose
Calendar Year-To-Date Per Ele		Disbursement For: Primary General
for Office S	Sought	Other (specify)
(a) SURTOTAL of Itemized Indepen	ndent Expenditures	
(a) SOBIOTAL OF REMIZED INDEPEN	Idon Experiorates	53.45
(b) SUBTOTAL of Unitemized Indep	pendent Expenditures	
	es	153.56
(carry total from last page	e forward to Line 7)	