

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Hy-Vee Gas		Date MM / DD / YYYY 09 / 08 / 2012
Mailing Address 727 Grand Ave		Amount 36.55 Transaction ID : 2412228
City Spencer	State IA	
Zip Code 51301	Purpose of Expenditure Transportation, lodging	Category/ Type 002
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 437.53		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 Comfort Inn Suites		Date MM / DD / YYYY 09 / 09 / 2012
Mailing Address 2938 5th Ave S.		Amount 106.39 Transaction ID : 2412229
City Fort Dodge	State IA	
Zip Code 50501	Purpose of Expenditure Transportation, lodging	Category/ Type 002
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 543.92		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 Southgate Expresse		Date MM / DD / YYYY 09 / 10 / 2012
Mailing Address 110 Airport Rd		Amount 32.01 Transaction ID : 2412230
City Ames	State IA	
Zip Code 50010	Purpose of Expenditure Transportation, lodging	Category/ Type 002
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 575.93		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.....	▶	174.95
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures	▶	
(carry total from last page forward to Line 7)		