

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. FRIENDS OF FARR

Mailing Address 555 Capitol Mall, Suite 1425

City Sacramento State CA Zip Code 95814

Purpose of Disbursement
Political Contribution

Candidate Name

Sam Farr

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 17

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2012

Transaction ID : B8FE4F709E14C441AA90

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. John Campbell for Congress

Mailing Address 4590 Maccarthur Boulevard
Suite 500

City Newport Beach State CA Zip Code 92660

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. John Campbell

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: CA District: 48

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2012

Transaction ID : BEFC5D449FE1A4FE5BD1

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KILROY FOR CONGRESS

Mailing Address P.O. Box 2582
Ste 305

City Columbus State OH Zip Code 43216

Purpose of Disbursement
Political Contribution

Candidate Name

Mary Jo Kilroy

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OH District: 15

Date of Disbursement

MM / DD / YYYY
03 / 02 / 2012

Transaction ID : B384F1DAAB64F42EB92A

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

3000.00

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