

# FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation <b>HUMANE SOCIETY LEGISLATIVE FUND</b>		3. FEC Identification Number <b>C</b> C90009358
(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. Occupation and Name of Employer (for Individual Filers Only)		

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?  No  Yes, it amends the report filed on  /  /

5. COVERING PERIOD:  
 FROM  /  /   
 THROUGH  /  /

6. TOTAL CONTRIBUTIONS.....  0.00

7. TOTAL INDEPENDENT EXPENDITURES .....  1103960.13

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Sara Amundson	<i>Sara Amundson</i>	01/29/2015

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F5N  
Transaction ID :

The Humane Society Legislative Fund received no contributions between 10/1/14 and 12/30/14 made for the purposes of furthering independent expenditures. The source of funding for the independent expenditures disclosed on the Form 5 are from HSLF general treasury funds. HSLF therefore reported zero receipts on Line 6 of this report.

Form/Schedule:  
Transaction ID:

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 143.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Ami Bera		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A74639BD34B2E454CA7C	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 01 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 143.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 52 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Scott H. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A919A7C9942174C16B67	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 125.40	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: <input type="checkbox"/> House State: WV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Shelley Moore Capito		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A48B782A577044D71A4E	

(a) SUBTOTAL of Itemized Independent Expenditures.....	411.40
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee List America		Date of Public Distribution/Dissemination 10 / 08 / 2014	
Mailing Address 5151 Wisconsin Avenue NW		Amount 1275.00	
City Washington	State DC	Zip Code 20016-4124	Transaction ID : A4AA0A7B17B904EDEA17
Purpose of Expenditure List Rental for Mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11416.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination 10 / 08 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 125.40	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : A239DF78994E84EFA872
Purpose of Expenditure Staff Time	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Ann McLane Kuster		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 125.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination 10 / 08 / 2014	
Mailing Address 700 Professional Drive		Amount 525.00	
City Gaithersburg	State MD	Zip Code 20879-3418	Transaction ID : A576155CC1B074815880
Purpose of Expenditure List Rental for Mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Frank A. LoBiondo		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7681.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1925.40
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 99.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11416.00		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : AA280910D06964EDEB74

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 9734.00	
City Riverside	State MO	Zip Code 64150-9405	
Purpose of Expenditure Production and postage of Mailers		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11416.00		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : A49DABBC89BD6431F9A1

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 110.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Frank A. LoBiondo		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7681.40		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : A3BE0B6D5537F44C3A2C

(a) SUBTOTAL of Itemized Independent Expenditures.....	9943.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 6734.00	
City Riverside	State MO	Zip Code 64150-9405	
Purpose of Expenditure Production and postage of Mailers		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Frank A. LoBiondo		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : ADB7C4D9EBE144A9EAF	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 08 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 136.40	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: <input type="checkbox"/> House State: NM <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Tom S. Udall		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : AA2876734112F42B68D2	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 09 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 107.80	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Vern G. Buchanan		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : AE4C853882A474ADF9C4	

(a) SUBTOTAL of Itemized Independent Expenditures.....	6978.20
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination 10 / 09 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 107.80	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : AEBA872191146469696A
Purpose of Expenditure Staff Time	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jerry McNerney		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 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date of Public Distribution/Dissemination 10 / 10 / 2014	
Mailing Address 606A N. Talbot Street Ste. #203		Amount 31000.00	
City St Michaels	State MD	Zip Code 21663-2110	Transaction ID : AB5112A4157AF9CCAEC
Purpose of Expenditure Online advertisements and landing page	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District:
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		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 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination 10 / 10 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 132.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : AE59EC9CD872747ADAD9
Purpose of Expenditure Staff Time for online ads and landing page	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		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 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	31239.80
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 606A N. Talbot Street Ste. #203		Amount 11000.00	
City St Michaels	State MD	Zip Code 21663-2110	
Purpose of Expenditure Online advertisements and landing page		Category/ Type	Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Mary L. Landrieu		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11385.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A9B082E6641574B81AAE

Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 606A N. Talbot Street Ste. #203		Amount 11000.00	
City St Michaels	State MD	Zip Code 21663-2110	
Purpose of Expenditure Online advertisements and landing page		Category/ Type	Office Sought: <input type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Jeff A. Merkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11429.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A799FC4C466AA46E29F3

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 165.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time for online ads and landing page		Category/ Type	Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Mary L. Landrieu		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11385.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A6664B6376C5543468CA

(a) SUBTOTAL of Itemized Independent Expenditures.....	22165.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 606A N. Talbot Street Ste. #203		Amount 11000.00	
City St Michaels	State MD	Zip Code 21663-2110	
Purpose of Expenditure Online advertisements and landing page		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11385.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : AAFFCD9CF4AAE404B98F

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 154.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time for online ads and landing page		Category/ Type	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 31154.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : AE175EF7442454514BFB

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 132.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time for online ads and landing page		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11385.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : AA5FB83CB0B6E4D2B891

(a) SUBTOTAL of Itemized Independent Expenditures.....	11286.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 606A N. Talbot Street Ste. #203		Amount 6000.00	
City St Michaels	State MD	Zip Code 21663-2110	
Purpose of Expenditure Online advertisements and landing page		Category/ Type	Transaction ID : ACC3CA624911440CE871
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 10
Calendar Year-To-Date Per Election for Office Sought 17548.00		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 Joe Trippi & Associates		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 606A N. Talbot Street Ste. #203		Amount 6000.00	
City St Michaels	State MD	Zip Code 21663-2110	
Purpose of Expenditure Online advertisements and landing page		Category/ Type	Transaction ID : AE0DDD6DEF1C64D36988
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Frank A. LoBiondo		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 02
Calendar Year-To-Date Per Election for Office Sought 13802.40		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 Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 121.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff Time for online ads and landing page		Category/ Type	Transaction ID : A57B0DDFB05B0417C946
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Jeff A. Merkley		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OR District:
Calendar Year-To-Date Per Election for Office Sought 11429.00		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)

(a) SUBTOTAL of Itemized Independent Expenditures.....	12121.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 121.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : A9099F26DDA8F4AD2AD0
Purpose of Expenditure Staff Time for online ads and landing page	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Frank A. LoBiondo		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		13802.40	

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 700 Professional Drive		Amount 282.83	
City Gaithersburg	State MD	Zip Code 20879-3418	Transaction ID : AA6C69D2ED7CC41028FF
Purpose of Expenditure List Rental for Mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Kyrsten Sinema		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		3598.56	

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 700 Professional Drive		Amount 5001.08	
City Gaithersburg	State MD	Zip Code 20879-3418	Transaction ID : A310F224F529444E8966
Purpose of Expenditure List Rental for Mailer	Category/ Type	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		78419.75	

(a) SUBTOTAL of Itemized Independent Expenditures.....	5404.91
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 77.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for mailer production		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Kyrsten Sinema		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 2014 <input type="checkbox"/> Other (specify)	
		Transaction ID : ACC5A4F789FE8451FBEC	

Full Name (Last, First, Middle Initial) of Payee West Coast Public Affairs		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 16060 Ventura Blvd.		Amount 42187.67	
City Encino	State CA	Zip Code 91436-2761	
Purpose of Expenditure Printing and Postage Production		Category/ Type	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		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 2014 <input type="checkbox"/> Other (specify)	
		Transaction ID : AB7E27B2FC94948B8AC6	

Full Name (Last, First, Middle Initial) of Payee West Coast Public Affairs		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 16060 Ventura Blvd.		Amount 3106.73	
City Encino	State CA	Zip Code 91436-2761	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Kyrsten Sinema		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 2014 <input type="checkbox"/> Other (specify)	
		Transaction ID : AD9D4F484832F413BB62	

(a) SUBTOTAL of Itemized Independent Expenditures.....	45371.40
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 77.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for mailer production		Category/ Type	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 78419.75		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A0C9716CD9DF7463B8D9

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 14 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 101.20	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of press release		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Tom A. Marino		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 101.20		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : AE7BE2C8581F043DDBD7

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 77.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for mailer production		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 25678.48		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A8EDA33A9C5DA4EA3A3

(a) SUBTOTAL of Itemized Independent Expenditures.....	255.20
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 132.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : ABDA505149FD744F6B42
Purpose of Expenditure Staff time for press release	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: OR <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Earl Blumenauer		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		132.00	

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 700 Professional Drive		Amount 1211.48	
City Gaithersburg	State MD	Zip Code 20879-3418	Transaction ID : AF6061386F6454B67BDE
Purpose of Expenditure List Rental for Mailer	Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		25678.48	

Full Name (Last, First, Middle Initial) of Payee West Coast Public Affairs		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 16 / 2014	
Mailing Address 16060 Ventura Blvd.		Amount 13005.00	
City Encino	State CA	Zip Code 91436-2761	Transaction ID : A4EC2C0D702EC45E3B3E
Purpose of Expenditure Production, printing and postage of mailer	Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		25678.48	

(a) SUBTOTAL of Itemized Independent Expenditures.....	14348.48
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 62281.00	
City Riverside	State MO	Zip Code 64150-9405	Transaction ID : A7FA320D969D84A45862
Purpose of Expenditure Production, printing, and postage for mailer	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Jeff A. Merkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 75457.63		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014	
Mailing Address 700 Professional Drive		Amount 1670.63	
City Gaithersburg	State MD	Zip Code 20879-3418	Transaction ID : A6F24730AB73541EBA65
Purpose of Expenditure List Rental for Mailer	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Jeff A. Merkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 75457.63		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 77.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : AF7FB2AB9A9B64F1386C
Purpose of Expenditure Staff time for mailer production	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Jeff A. Merkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 75457.63		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	64028.63
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 77.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : A14644EB220C54DA8AFE
Purpose of Expenditure Staff time for mailer production	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Patrick L. Meehan Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		8069.63	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 77.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : A3E482787CECB46C1940
Purpose of Expenditure Staff time for mailer production	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Mike G. Fitzpatrick		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		8084.60	

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 7238.00	
City Riverside	State MO	Zip Code 64150-9405	Transaction ID : AF5B868DBED9C4B6BB5
Purpose of Expenditure Production, printing, and postage for mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Chris P. Gibson		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		7897.63	

(a) SUBTOTAL of Itemized Independent Expenditures.....	7392.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 66.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for mailer production		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Chris P. Gibson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : AF19CA4C8D582438BAB6	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 33.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for phone calls		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A6C6F65559DA4B2987D	

Full Name (Last, First, Middle Initial) of Payee Campaign Tel Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 205 E. 16th St. Ste. 3A		Amount 9801.60	
City New York	State NY	Zip Code 10003-3789	
Purpose of Expenditure Phone calls		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A15A9E2E45AE04330898	

(a) SUBTOTAL of Itemized Independent Expenditures.....	9900.60
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 700 Professional Drive		Amount 579.60	
City Gaithersburg	State MD	Zip Code 20879-3418	
Purpose of Expenditure List Rental for Mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Mike G. Fitzpatrick		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : A58196D13694E4A64ABE

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 7120.00	
City Riverside	State MO	Zip Code 64150-9405	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Mike G. Fitzpatrick		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : ABA514FBBB5614C02B0D

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 125.40	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for press release		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Grace Meng		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : A0F146073D031410D986

(a) SUBTOTAL of Itemized Independent Expenditures.....	7825.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 700 Professional Drive		Amount 593.63	
City Gaithersburg	State MD	Zip Code 20879-3418	
Purpose of Expenditure List Rental for Mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Chris P. Gibson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7897.63		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : AD326DF1A646640A19AB

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 33.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for phone calls		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 38145.88		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : AE16F6F66819F4016B66

Full Name (Last, First, Middle Initial) of Payee Campaign Tel Ltd.		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 205 E. 16th St. Ste. 3A		Amount 12434.40	
City New York	State NY	Zip Code 10003-3789	
Purpose of Expenditure Phone calls		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 38145.88		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : AA3A8C0B7B81845A985B

(a) SUBTOTAL of Itemized Independent Expenditures.....	13061.03
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 700 Professional Drive		Amount 579.23	
City Gaithersburg	State MD	Zip Code 20879-3418	
Purpose of Expenditure List Rental for Mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Patrick L. Meehan Jr.		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A761E1D390A1344A0866	

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 7112.00	
City Riverside	State MO	Zip Code 64150-9405	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Patrick L. Meehan Jr.		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A9B291FD2542E4246847	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 20 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 101.20	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for press release		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Cheri L. Bustos		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : AD3141D52390B4E96A09	

(a) SUBTOTAL of Itemized Independent Expenditures.....	7792.43
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee West Coast Public Affairs		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2014	
Mailing Address 16060 Ventura Blvd.		Amount 13005.45	
City Encino	State CA	Zip Code 91436-2761	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 51195.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A791E01FE9B5D4B08BDE

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 22 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 44.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for mailer production		Category/ Type	Office Sought: <input type="checkbox"/> House State: IA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Bruce L Braley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 51195.33		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A5DD99DE7D77347ADBAC

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 66.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of mailer		Category/ Type	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 120673.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A4261981AFD864996B97

(a) SUBTOTAL of Itemized Independent Expenditures.....	13115.45
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee West Coast Public Affairs		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 24 / 2014	
Mailing Address 16060 Ventura Blvd.		Amount 42187.67	
City Encino	State CA	Zip Code 91436-2761	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 120673.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : AADCADFC949C3401599F

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 1723.00	
City Riverside	State MO	Zip Code 64150-9405	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 52 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Scott H. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2239.15		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A44ED9C1C79C048708CF

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 70.40	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of TV ad		Category/ Type	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 640849.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : A582A8C67F0DF440DAB4

(a) SUBTOTAL of Itemized Independent Expenditures.....	43981.07
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 700 Professional Drive		Amount 378.68	
City Gaithersburg	State MD	Zip Code 20879-3418	
Purpose of Expenditure List Rental for Mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Carol Shea-Porter		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 2014 <input type="checkbox"/> Other (specify)	
		Transaction ID : A5D503A3016494FF6897	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 105.60	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of press release		Category/ Type	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		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 2014 <input type="checkbox"/> Other (specify)	
		Transaction ID : A1269B3177BCF45B2992	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of mailer		Category/ Type	Office Sought: <input type="checkbox"/> House State: OR <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Jeff A. Merkley		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 2014 <input type="checkbox"/> Other (specify)	
		Transaction ID : A23A703B13C80449898B	

(a) SUBTOTAL of Itemized Independent Expenditures.....	539.28
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : ADC817F5476884F3085C
Purpose of Expenditure Staff time for review of mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: OR District: 05
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Kurt Schrader		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2418.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : A01D5760CABB5490D90E
Purpose of Expenditure Staff time for review of mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NH District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Carol Shea-Porter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2662.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 2909.00	
City Riverside	State MO	Zip Code 64150-9405	Transaction ID : A10B344FF345C449ABAF
Purpose of Expenditure Production, printing, and postage for mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Frank A. LoBiondo		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 16766.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	3019.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 700 Professional Drive		Amount 326.40	
City Gaithersburg	State MD	Zip Code 20879-3418	
Purpose of Expenditure List Rental for Mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: OR <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Kurt Schrader		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A7BA526AEF6264402BC3	

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 700 Professional Drive		Amount 303.53	
City Gaithersburg	State MD	Zip Code 20879-3418	
Purpose of Expenditure List Rental for Mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Ami Bera		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : ACEC3098B33E04EE9880	

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 700 Professional Drive		Amount 318.15	
City Gaithersburg	State MD	Zip Code 20879-3418	
Purpose of Expenditure List Rental for Mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 52 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Scott H. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : AF1EF4C9B0DC940F0921	

(a) SUBTOTAL of Itemized Independent Expenditures.....	948.08
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 2057.00	
City Riverside	State MO	Zip Code 64150-9405	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NH <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Carol Shea-Porter		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 2014 <input type="checkbox"/> Other (specify)	
		2662.28	

Transaction ID : A8D2C434A399B43BEC4

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 1640.00	
City Riverside	State MO	Zip Code 64150-9405	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Ami Bera		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 2014 <input type="checkbox"/> Other (specify)	
		2141.53	

Transaction ID : ACB72111533784772B14

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Mike G. Fitzpatrick		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 2014 <input type="checkbox"/> Other (specify)	
		11263.60	

Transaction ID : A9D7258DB0D454DF3ACE

(a) SUBTOTAL of Itemized Independent Expenditures.....	3752.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : AAC818C741CF546C6A08
Purpose of Expenditure Staff time for review of mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 52 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Scott H. Peters		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2239.15	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : AD411420E7B254753AF8
Purpose of Expenditure Staff time for review of mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Ami Bera		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		2141.53	

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 3124.00	
City Riverside	State MO	Zip Code 64150-9405	Transaction ID : A6D2CDABDCB994293B43
Purpose of Expenditure Production, printing, and postage for mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Mike G. Fitzpatrick		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		11263.60	

(a) SUBTOTAL of Itemized Independent Expenditures.....	3234.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 103.40	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of press release		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jared Polis		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A60BF5969A29B4897956	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Kyrsten Sinema		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A5DFAAD8DA3AE4C7CB1	

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 1784.00	
City Riverside	State MO	Zip Code 64150-9405	
Purpose of Expenditure Production, printing, and postage for mailer		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: OR <input type="checkbox"/> Senate District: 05 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Kurt Schrader		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
		Transaction ID : A0685DF18CDFA4E8C89E	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1942.40
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 57788.00	
City Riverside	State MO	Zip Code 64150-9405	Transaction ID : A7F02CE7FE09C4F79A1D
Purpose of Expenditure Production, printing, and postage for mailer	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: OR District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Jeff A. Merkley		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 133300.63		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 44.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : AF6ED9127488945B286B
Purpose of Expenditure Staff time for review of mailer	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32978.60		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 5552.00	
City Riverside	State MO	Zip Code 64150-9405	Transaction ID : A5FCFF29CEB0643638C2
Purpose of Expenditure Production, printing, and postage for mailer	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 32978.60		Disbursement For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	63384.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : A83709671E2B5474DA4F
Purpose of Expenditure Staff time for review of mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NJ District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Frank A. LoBiondo		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 16766.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee West Coast Public Affairs		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 16060 Ventura Blvd.		Amount 3106.73	
City Encino	State CA	Zip Code 91436-2761	Transaction ID : A3F9416FAC5C84391898
Purpose of Expenditure Production, printing, and postage for mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: AZ District: 09
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Kyrsten Sinema		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 6760.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 3189.00	
City Riverside	State MO	Zip Code 64150-9405	Transaction ID : AF7318B70A4BB4235924
Purpose of Expenditure Production, printing, and postage for mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: NY District: 19
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Chris P. Gibson		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 11141.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	6350.73
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : A67234C2927C14BBF88A
Purpose of Expenditure Staff time for review of mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 19 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Chris P. Gibson		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		11141.63	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 55.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : A5FD16F43F23143049D2
Purpose of Expenditure Staff time for review of mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Patrick L. Meehan Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		11243.63	

Full Name (Last, First, Middle Initial) of Payee Candidate Command		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 28 / 2014	
Mailing Address 1831 NW Vivion Ste. 101		Amount 3119.00	
City Riverside	State MO	Zip Code 64150-9405	Transaction ID : A7C450FDA80B04648B8F
Purpose of Expenditure Production, printing, and postage for mailer	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Patrick L. Meehan Jr.		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		11243.63	

(a) SUBTOTAL of Itemized Independent Expenditures.....	3229.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date of Public Distribution/Dissemination 10 / 28 / 2014	
Mailing Address 606A N. Talbot Street Ste. #203		Amount 520000.00	
City St Michaels	State MD	Zip Code 21663-2110	Transaction ID : AD0C017DF96344AE4B8E
Purpose of Expenditure TV Advertisement buy and production	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: MI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Gary C. Peters		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 640849.42		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Campaign Tel Ltd.		Date of Public Distribution/Dissemination 10 / 29 / 2014	
Mailing Address 205 E. 16th St. Ste. 3A		Amount 9801.60	
City New York	State NY	Zip Code 10003-3789	Transaction ID : A96393A07BA424F1D947
Purpose of Expenditure Phone calls	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: CA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Rep. Jeff Denham		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 42780.20		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Campaign Tel Ltd.		Date of Public Distribution/Dissemination 10 / 29 / 2014	
Mailing Address 205 E. 16th St. Ste. 3A		Amount 12434.40	
City New York	State NY	Zip Code 10003-3789	Transaction ID : AD8342153F3854C78993
Purpose of Expenditure Phone Calls	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: IA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Joni K. Ernst		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 63629.73		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	542236.00
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee West Coast Public Affairs		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 21 / 2014	
Mailing Address 16060 Ventura Blvd.		Amount 13037.64	
City Encino	State CA	Zip Code 91436-2761	Transaction ID : AF588F7079E804F08A64
Purpose of Expenditure Production, printing, and postage for mailer	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: LA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Mary L. Landrieu		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff2014	

Full Name (Last, First, Middle Initial) of Payee Humane Society of the United States		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 21 / 2014	
Mailing Address 700 Professional Drive		Amount 1500.00	
City Gaithersburg	State MD	Zip Code 20879-3418	Transaction ID : A9BF6541936C24805942
Purpose of Expenditure List Rental for Mailer	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: LA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Mary L. Landrieu		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff2014	

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 21 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 44.00	
City Washington	State DC	Zip Code 20037-1525	Transaction ID : AEC38DA003E424F60A51
Purpose of Expenditure Staff time for review of mailer	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: LA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Mary L. Landrieu		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff2014	

(a) SUBTOTAL of Itemized Independent Expenditures.....	14581.64
(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**

NAME OF FILER (In Full)  
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Joe Trippi & Associates		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 26 / 2014	
Mailing Address 606A N. Talbot Street Ste. #203		Amount 132000.00	
City St Michaels	State MD	Zip Code 21663-2110	
Purpose of Expenditure TV Advertisement buy and production		Category/ Type	Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Mary L. Landrieu		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 146779.64		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff2014	

Transaction ID : AC640B4819E4904843AD2

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 26 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 66.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for tv ad review		Category/ Type	Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Mary L. Landrieu		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 146779.64		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff2014	

Transaction ID : AC6A1DBFD04B94DEB52

Full Name (Last, First, Middle Initial) of Payee Humane Society Legislative Fund		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 26 / 2014	
Mailing Address 2100 L St NW Ste 310		Amount 132.00	
City Washington	State DC	Zip Code 20037-1525	
Purpose of Expenditure Staff time for review of press release		Category/ Type	Office Sought: <input type="checkbox"/> House State: LA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Sen. Mary L. Landrieu		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 146779.64		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Runoff2014	

Transaction ID : A6AB7E97F2D90437EBE3

(a) SUBTOTAL of Itemized Independent Expenditures.....	132198.00
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	1103960.13