

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 Humane Society Legislative Fund Political Action Committee

ADDRESS (number and street) 519 C Street, NE Washington DC 20002 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00466813 3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) [] AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) July 15 Quarterly Report (Q2) October 15 Quarterly Report (Q3) January 31 Year-End Report (YE) July 31 Mid-Year Report (Non-election Year Only) (MY) Termination Report (TER) (b) Monthly Report Due On: Feb 20 (M2) Mar 20 (M3) Apr 20 (M4) May 20 (M5) Jun 20 (M6) Jul 20 (M7) Aug 20 (M8) Sep 20 (M9) Oct 20 (M10) Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only) Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12S) Election on M M / D D / Y Y Y Y Y Y in the State of (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S) Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 05 / 01 / 2012 through 05 / 31 / 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Sara J. Amundson

Signature of Treasurer Sara J. Amundson [Electronically Filed] Date 06 / 20 / 2012

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Humane Society Legislative Fund Political Action Committee

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="66912.58"/>	<input type="text" value="66912.58"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="42909.18"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="23911.00"/>	<input type="text" value="44609.13"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="66820.18"/>	<input type="text" value="111521.71"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="18620.46"/>	<input type="text" value="63321.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="48199.72"/>	<input type="text" value="48199.72"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Humane Society Legislative Fund Political Action Committee

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11000.00	26250.00
(ii) Unitemized	12911.00	18359.13
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	23911.00	44609.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	23911.00	44609.13
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	23911.00	44609.13
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	23911.00	44609.13

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	120.46	321.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	120.46	321.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18500.00	58000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	5000.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	5000.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18620.46	63321.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18620.46	63321.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	23911.00	44609.13
34. Total Contribution Refunds (from Line 28(d))	0.00	5000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23911.00	39609.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	120.46	321.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	120.46	321.99

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 14
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

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

A. COLLEEN HUSTEAD
Full Name (Last, First, Middle Initial)
Mailing Address 2848 N WHITE OAK RD
City Gladewater State TX Zip Code 75647-7900
FEC ID number of contributing federal political committee. **C**
Name of Employer Information Requested Occupation Information Requested
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2012
Transaction ID : A45BAC539486A48C6B08
Amount of Each Receipt this Period
250.00

B. GARRY JONES
Full Name (Last, First, Middle Initial)
Mailing Address 1151 PRESERVE POINT DR
City Winter Park State FL Zip Code 32789-5932
FEC ID number of contributing federal political committee. **C**
Name of Employer Full Sail University Occupation President
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 09 / 2012
Transaction ID : A3C6D44AFDB79405C8DD
Amount of Each Receipt this Period
500.00

C. Ruthanne Luberski
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 34001
City Fullerton State CA Zip Code 92834-9411
FEC ID number of contributing federal political committee. **C**
Name of Employer Homemaker Occupation Homemaker
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2012
Transaction ID : A9117469556DD4B33AC8
Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	5750.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 7 OF 14
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)
A. Leslie Miller

Mailing Address 1111 Barberry Road

City Bryn Mawr	State PA	Zip Code 19010-1907
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-Employed	Occupation Attorney
-----------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2012

Transaction ID : A1D3AFDDD9F2A44FCA8E

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. CAROL STOCKER

Mailing Address 20 HICKORY PT

City Springfield	State IL	Zip Code 62712-9524
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FEC ID number of contributing federal political committee. **C**

Name of Employer Information Requested	Occupation Information Requested
---	-------------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	11	/	2012

Transaction ID : ABD8CC19D6C8D4FA98EE

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
C.

Mailing Address

City	State	Zip Code
------	-------	----------

FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5250.00
TOTAL This Period (last page this line number only).....▶	11000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address 215 PENNSYLVANIA AVE SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Bank Fee

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 30 / 2012

Transaction ID : B435959E15FB045688B5

Amount of Each Disbursement this Period

120.46

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

120.46

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

120.46

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. BEN CARDIN FOR SENATE

Mailing Address P.O. BOX 21093

City CATONSVILLE State MD Zip Code 21228

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. Benjamin L. Cardin

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MD District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2012

Transaction ID : B35A4A5B46E2F4909881

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BILL NELSON FOR U S SENATE

Mailing Address 972 W WHITMIRE DRIVE

City MELBOURNE State FL Zip Code 32935

Purpose of Disbursement
Political Contribution

Candidate Name

Sen. Bill Nelson

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: FL District:

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2012

Transaction ID : BA54B67A0F9F94A7EA1C

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Blumenauer for Congress

Mailing Address 830 NE Holladay
#105

City Portland State OR Zip Code 97232

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Earl Blumenauer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: OR District: 03

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2012

Transaction ID : BF837FC2F1EC44528AF8

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. CHRISTIE VILSACK FOR IOWA

Mailing Address PO BOX 641

City AMES State IA Zip Code 50010

Purpose of Disbursement
Political Contribution

Candidate Name
Christie Vilsack

Office Sought: House
 Senate
 President
State: IA District: 04

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 16 / 2012

Transaction ID : B3D500AE9D76E444F9B3

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE FOR A LIVABLE FUTURE

Mailing Address 830 NE HOLLADAY STREET
ROOM 105

City PORTLAND State OR Zip Code 97232

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼ Other2012

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : B1E4CAF6C4B234C43AB6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. CONYERS FOR CONGRESS

Mailing Address 1831 Bay St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. John Conyers Jr.

Office Sought: House
 Senate
 President
State: MI District: 14

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : B68E3EA2192644C9B845

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Dina Titus for Congress

Mailing Address P O Box 50614

City Henderson State NV Zip Code 89016

Purpose of Disbursement
Political Contribution

Candidate Name
Rep. Dina Titus

Office Sought: House
 Senate
 President
State: NV District: 03

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	3		2	0	1	2

Transaction ID : B73125B83C0B94348B3F

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

B. DIRIGO PAC

Mailing Address PO BOX 1355

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼
Other2012

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	1	2

Transaction ID : BC9D598A51DE64841ABC

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

Full Name (Last, First, Middle Initial)

C. FRIENDS OF DAVE REICHERT

Mailing Address P. O. Box 53322

City Bellevue State WA Zip Code 98015

Purpose of Disbursement
Political Contribution

Candidate Name
Dave Reichert

Office Sought: House
 Senate
 President
State: WA District: 08

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	1		2	0	1	2

Transaction ID : B0C22AF03717C4CF0A5E

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0

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

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

3	0	0	0	0	0	0	0	0	0

1	0	0	0	0	0	0	0	0	0

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. FUND FOR THE MAJORITY

Mailing Address 1801 AVENUE OF THE STARS, #829

City LOS ANGELES State CA Zip Code 90067

Purpose of Disbursement
Political Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) **Other2012**

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2012

Transaction ID : B1DB742E501A4446F850

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LOEBSACK FOR CONGRESS

Mailing Address PO BOX 3013

City IOWA CITY State IA Zip Code 52244

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Dave Loeb sack

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: IA District: 02

Date of Disbursement

MM / DD / YYYY
05 / 23 / 2012

Transaction ID : BC3AFC74D41714BBD872

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MARTIN HEINRICH FOR SENATE

Mailing Address 2118 CENTRAL AVENUE SE
#71

City Albuquerque State NM Zip Code 87106

Purpose of Disbursement
Political Contribution

Candidate Name

Martin Heinrich

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: NM District:

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2012

Transaction ID : B20EDCD2D6B5F4FDFB22

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. MARTIN HEINRICH FOR SENATE

Mailing Address 2118 CENTRAL AVENUE SE
#71

City Albuquerque State NM Zip Code 87106

Purpose of Disbursement
Political Contribution

Candidate Name
Martin Heinrich

Office Sought: House
 Senate
 President
State: NM District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : **B6C39F3FC5717446CBD0**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MARY BONO MACK COMMITTEE

Mailing Address PO Box 3370

City Palm Springs State CA Zip Code 92263

Purpose of Disbursement
Political Contribution

Candidate Name
Mack, Mary Bono

Office Sought: House
 Senate
 President
State: CA District: 45

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2012

Transaction ID : **B8F12CDDBE9B84788A41**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PETERS FOR CONGRESS

Mailing Address PO BOX 226

City BLOOMFIELD HILLS State MI Zip Code 48303

Purpose of Disbursement
Political Contribution

Candidate Name
Gary Peters

Office Sought: House
 Senate
 President
State: MI District: 09

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : **BEA3DEFE50ADA40BBAC**

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Humane Society Legislative Fund Political Action Committee

Full Name (Last, First, Middle Initial)

A. STRICKLAND FOR CONGRESS 2012

Mailing Address 603 E ALTON AVE STE H

City SANTA ANA State CA Zip Code 92705

Purpose of Disbursement
Primary Contribution

Candidate Name

Anthony A Strickland

Office Sought: House
 Senate
 President
State: CA District: 26

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2012

Transaction ID : BA3F47293CF234AE9AB2

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Thomas Marino for Congress

Mailing Address PO Box 653

City Williamsport State PA Zip Code 17703

Purpose of Disbursement
Political Contribution

Candidate Name

Rep. Tom Marino

Office Sought: House
 Senate
 President
State: PA District: 10

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2012

Transaction ID : B25DC22CEAB754A94B68

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

3500.00

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

18500.00