

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
HUMANE SOCIETY LEGISLATIVE FUND

Full Name (Last, First, Middle Initial) of Payee Michael Markarian		Date MM / DD / YYYY 05 / 29 / 2012
Mailing Address 2100 L Street NW Suite 310		Amount 12.08
City Washington	State DC	
Zip Code 20037	Transaction ID : 2412168	
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Anthony A Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 164.68		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jennifer Fearing		Date MM / DD / YYYY 05 / 29 / 2012
Mailing Address 2100 L Street NW Suite 310		Amount 5.36
City Washington	State DC	
Zip Code 20037	Transaction ID : 2412169	
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Anthony A Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 170.04		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Heather Sullivan		Date MM / DD / YYYY 05 / 29 / 2012
Mailing Address 2100 L Street NW Suite 310		Amount 7.63
City Washington	State DC	
Zip Code 20037	Transaction ID : 2412170	
Purpose of Expenditure Staff Time	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Anthony A Strickland		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 177.67		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	25.07
(b) SUBTOTAL of Unitemized Independent Expenditures.....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	