

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation VOTEVETS.ORG ACTION FUND		3. FEC Identification Number C C90010620
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2201 WISCONSIN AVE NW #320		
(c) City, State and ZIP Code WASHINGTON DC 20007		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report
☐ July 15 Quarterly Report
☐ October 15 Quarterly Report
☐ January 31 Year-End Report
- ☒ 24-Hour Report
☐ 48-Hour Report

b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

09 / 27 / 2012
 THROUGH
 09 / 30 / 2012

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES

164850.00

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. In addition, (if the independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Peter Mellman

Peter Mellman

09/27/2012

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 2
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

VOTEVETS.ORG ACTION FUND

Full Name (Last, First, Middle Initial) of Payee Shorr Johnson Magnus		Date MM / DD / YYYY 09 / 27 / 2012	
Mailing Address 1831 Chestnut Street		Amount 15000.00	
City Philadelphia	State PA	Zip Code 19103	
Purpose of Expenditure Ad production costs (Respect)		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 164850.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee Waterfront Strategies		Date MM / DD / YYYY 09 / 27 / 2012	
Mailing Address 3050 K Street, NW		Amount 149850.00	
City Washington	State DC	Zip Code 20007	
Purpose of Expenditure Broadcast TV ad buy (Respect)		Category/ Type 004	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Jeff Flake		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 164850.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY	
Mailing Address		Amount	
City	State	Zip Code	
Purpose of Expenditure	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____	
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input 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 2012 <input type="checkbox"/> Other (specify) _____	
(a) SUBTOTAL of Itemized Independent Expenditures 164850.00 (b) SUBTOTAL of Unitemized Independent Expenditures..... (c) TOTAL Independent Expenditures 164850.00 (carry total from last page forward to Line 7)			