

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

VOTEVETS

ADDRESS (number and street)

1831 Bay Street, SE

☐Check if different
than previously
reported. (ACC)

Washington

DC

20003

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00418897

3. IS THIS
REPORT☒NEW
(N)

OR

☐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
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

1 0

0 1

2 0 1 0

through

1 1

2 2

2 0 1 0

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

Peter Granato

Signature of Treasurer

Electronically Filed by Peter Granato

Date

1 2

0 1

2 0 1 0

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

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

A. Form/Schedule : **F3XN**

Transaction ID :

The expenditures listed as Strategic Management Services on Schedule B were not made on behalf of any federal candidates and were properly disclosed on the corresponding disbursement schedule of the report. The expenditures disclosed on Schedule B for Communications Services are not public communications or voter drive activity containing express advocacy. These expenditures were made exclusively to support the activities of VoteVets.

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

3 / 27

Write or Type Committee Name
VOTEVETS

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1	2010	54702.44
(b) Cash on Hand at Beginning of Reporting Period	52195.49	
(c) Total Receipts (from Line 19)	16235.44	82695.62
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	68430.93	137398.06
7. Total Disbursements (from Line 31)	12132.90	81100.03
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56298.03	56298.03
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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)

4 / 27

Write or Type Committee Name
VOTEVETS

Report Covering the Period:

From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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)	9350.00	17850.00
(ii) Unitemized	1885.44	17345.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)	11235.44	35195.62
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	5000.00	47500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	16235.44	82695.62
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 Transfer (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))	16235.44	82695.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16235.44	82695.62

DETAILED SUMMARY PAGE

of Disbursements

5 / 27

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared 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.....	9132.90	52150.03	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	9132.90	52150.03	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	28000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (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	0.00	
(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	0.00	
29. Other Disbursements.....	0.00	950.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared 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))..	12132.90	81100.03	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12132.90	81100.03	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 27

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)	16235.44	82695.62
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16235.44	82695.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9132.90	52150.03
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9132.90	52150.03

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

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

FOR LINE NUMBER: PAGE 7 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

VOTEVETS

A.

Full Name (Last, First, Middle Initial)

Daniel Drake

Mailing Address 369 Marion Ave

City

Mill Valley

State

CA

Zip Code

94941

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C18988615

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

Sally Goodwin

Mailing Address 3677 Woodland Hall Lane

City

Clinton

State

WA

Zip Code

98236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

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

Transaction ID: C19011883

Amount of Each Receipt this Period

150.00

C.

Full Name (Last, First, Middle Initial)

Sally Goodwin

Mailing Address 3677 Woodland Hall Lane

City

Clinton

State

WA

Zip Code

98236

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 9 / 2 0 1 0

Transaction ID: C19011884

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional)

2350.00

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 8 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)
 Kathleen Horne

Mailing Address 211 Elgin Ave

City State Zip Code
 Forest Park IL 60130

FEC ID number of contributing
federal political committee.

C

Name of Employer
 N/A

Occupation
 Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 0 8 / 2 0 1 0

Transaction ID: C18918526

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)
 Henry Lord

Mailing Address 313 Audubon Court

City State Zip Code
 New Haven CT 06510

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self-Employed

Occupation
 Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID: C19011894

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
 Henry Lord

Mailing Address 313 Audubon Court

City State Zip Code
 New Haven CT 06510

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self-Employed

Occupation
 Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

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

Transaction ID: C19011893

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2250.00

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 9 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VOTEVETS

A.

Full Name (Last, First, Middle Initial)

Henry Lord

Mailing Address 313 Audubon Court

City

New Haven

State

CT

Zip Code

06510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: C19011890

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Henry Lord

Mailing Address 313 Audubon Court

City

New Haven

State

CT

Zip Code

06510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: C19011891

Amount of Each Receipt this Period

1000.00

See Refund on Next Report

C.

Full Name (Last, First, Middle Initial)

Henry Lord

Mailing Address 313 Audubon Court

City

New Haven

State

CT

Zip Code

06510

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Investor

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 1 0

Transaction ID: C19011892

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

2500.00

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 10 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)
 Donald Merino

Mailing Address 10058 Se 16th St

City State Zip Code
 Bellevue WA 98004

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Intellectual Ventures

Occupation
 Executive

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 1 2 / 2 0 1 0

Transaction ID: C19011885

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)
 Patrick Pound

Mailing Address 3009 44th St E

City State Zip Code
 Tacoma WA 98443-1611

FEC ID number of contributing
federal political committee.

C

Name of Employer
 U.S. Army

Occupation
 Master Planner

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y
 1 0 / 2 6 / 2 0 1 0

Transaction ID: C19011861

Amount of Each Receipt this Period

200.00

C.

Full Name (Last, First, Middle Initial)
 Tom Shanks

Mailing Address 4680 Wallace Rd. N.

City State Zip Code
 Santa Rosa CA 95404

FEC ID number of contributing
federal political committee.

C

Name of Employer
 Self-Employed

Occupation
 Futures Trader

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: C19011857

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

800.00

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 11 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VOTEVETS

A.

Full Name (Last, First, Middle Initial)

Michael Williams

Mailing Address 12 East Melrose St

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hogan Lovells US LLP

Occupation
Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 1 / 2 0 1 0

Transaction ID: C19011850

Amount of Each Receipt this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Megan Hull

Mailing Address 2226 Hall Pl. NW

City

Washington

State

DC

Zip Code

20007

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self-Employed

Occupation
Consultant

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 1 0

Transaction ID: C19011816A

Amount of Each Receipt this Period

1000.00

* Earmarked Contribution:
See Below

C.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation
Conduit total listed in Agg. field

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1590.44

Date of Receipt

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

Transaction ID: C19011816AB

Amount of Each Receipt this Period

1000.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

1250.00

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 12 / 27

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VOTEVETS

A.

Full Name (Last, First, Middle Initial)

Kathleen Zimpleman

Mailing Address 2186 South Orilla Road

City

Cumming

State

IA

Zip Code

50061

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 1 / 2 0 1 0

Transaction ID: C19011824A

Amount of Each Receipt this Period

100.00

* Earmarked Contribution:
See Below

B.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.

C

C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

1590.44

Date of Receipt

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

Transaction ID: C19011824AB

Amount of Each Receipt this Period

100.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

C.

Full Name (Last, First, Middle Initial)

Kathleen Zimpleman

Mailing Address 2186 South Orilla Road

City

Cumming

State

IA

Zip Code

50061

FEC ID number of contributing
federal political committee.

C

Name of Employer
N/A

Occupation

Homemaker

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y Y
 1 1 / 1 1 / 2 0 1 0

Transaction ID: C19011831A

Amount of Each Receipt this Period

100.00

* Earmarked Contribution:
See Below

SUBTOTAL of Receipts This Page (optional)

200.00

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 13 / 27

(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)

VOTEVETS

A.

Full Name (Last, First, Middle Initial)

ACTBLUE

Mailing Address PO Box 382110

City

Cambridge

State

MA

Zip Code

02238-2110

FEC ID number of contributing
federal political committee.**C** C00401224

Name of Employer

Occupation

Conduit total listed in Agg. field

Receipt For:

☐
☐
☐

Primary

☐

General

Other (specify) ▼

Aggregate Year-to-Date ▼

1590.44

Date of Receipt

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

Transaction ID: C19011831AB

Amount of Each Receipt this Period

100.00

[MEMO ITEM]Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

0.00

TOTAL This Period (last page this line number only)

9350.00

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

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

FOR LINE NUMBER: PAGE 14 / 27

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

VOTEVETS

A.

Full Name (Last, First, Middle Initial)

International Association of Fire Fighters Interes

Mailing Address 1750 New York Ave NW

City

Washington

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C

C00029447

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

Transaction ID: C18984388

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

5000.00

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)

PAGE 15 / 27

<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)
VOTEVETS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441687</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>2 4</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>0.79</div> </p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441688</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 0</div> <div>3 1</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>41.35</div> </p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441689</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div> <div>1 1</div> <div>0 2</div> <div>2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>0.44</div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

42.58

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)

PAGE 16 / 27

<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)
VOTEVETS

<p>A. Full Name (Last, First, Middle Initial) ActBlue Technical Services</p> <p>Mailing Address 14 Arrow Street</p> <p>City Cambridge State MA Zip Code 02138</p> <p>Purpose of Disbursement Credit Card Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441690</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20.30"/></p>
<p>B. Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 99 Jefferson Rd, Mail Stop 220</p> <p>City Parsippany State NJ Zip Code 07054</p> <p>Purpose of Disbursement Payroll Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441701</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="61.07"/></p>
<p>C. Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 99 Jefferson Rd, Mail Stop 220</p> <p>City Parsippany State NJ Zip Code 07054</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441702</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="66.28"/></p>

SUBTOTAL of Disbursements This Page (optional)

147.65

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)

PAGE 17 / 27

<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)
VOTEVETS

A. Full Name (Last, First, Middle Initial) ADP	Transaction ID: D441703 Date of Disbursement
Mailing Address 99 Jefferson Rd, Mail Stop 220	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 0 / 2 0 1 0</div> </div>
City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Payroll Fees Candidate Name	Amount of Each Disbursement this Period <div>59.07</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
B. Full Name (Last, First, Middle Initial) ADP	Transaction ID: D441704 Date of Disbursement
Mailing Address 99 Jefferson Rd, Mail Stop 220	<div> <div>M M / D D / Y Y Y Y</div> <div>1 0 / 2 8 / 2 0 1 0</div> </div>
City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Payroll Taxes Candidate Name	Amount of Each Disbursement this Period <div>66.28</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>
C. Full Name (Last, First, Middle Initial) ADP	Transaction ID: D441705 Date of Disbursement
Mailing Address 99 Jefferson Rd, Mail Stop 220	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 0 3 / 2 0 1 0</div> </div>
City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Payroll Fees Candidate Name	Amount of Each Disbursement this Period <div>59.07</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

184.42

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)

PAGE 18 / 27

<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)
VOTEVETS

A. Full Name (Last, First, Middle Initial) ADP	Transaction ID: D441706 Date of Disbursement
Mailing Address 99 Jefferson Rd, Mail Stop 220	<div> <div><small>M</small>1</div> <div><small>M</small>1</div> <div>/</div> <div><small>D</small>1</div> <div><small>D</small>2</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>1</div> <div><small>Y</small>0</div> </div>
City Parsippany State NJ Zip Code 07054	Amount of Each Disbursement this Period
Purpose of Disbursement Payroll Taxes Candidate Name	<div>66.28</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: D441697 Date of Disbursement
Mailing Address 915 S 500 E Ste 200	<div> <div><small>M</small>1</div> <div><small>M</small>0</div> <div>/</div> <div><small>D</small>0</div> <div><small>D</small>4</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>1</div> <div><small>Y</small>0</div> </div>
City American Fork State UT Zip Code 84003-3373	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<div>20.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Authorize.net	Transaction ID: D441698 Date of Disbursement
Mailing Address 915 S 500 E Ste 200	<div> <div><small>M</small>1</div> <div><small>M</small>1</div> <div>/</div> <div><small>D</small>0</div> <div><small>D</small>2</div> <div>/</div> <div><small>Y</small>2</div> <div><small>Y</small>0</div> <div><small>Y</small>1</div> <div><small>Y</small>0</div> </div>
City American Fork State UT Zip Code 84003-3373	Amount of Each Disbursement this Period
Purpose of Disbursement Credit Card Processing Fees Candidate Name	<div>20.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

106.28

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)

PAGE 19 / 27

<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)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address 56 E 42nd St

City State Zip Code
New York NY 10017-5407

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441691

Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

45.95

B.

Full Name (Last, First, Middle Initial)
Bank of America

Mailing Address 56 E 42nd St

City State Zip Code
New York NY 10017-5407

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441692

Date of Disbursement

11 / 01 / 2010

Amount of Each Disbursement this Period

263.02

C.

Full Name (Last, First, Middle Initial)
Eric Schmeltzer

Mailing Address 75 Sutton St
1

City State Zip Code
Brooklyn NY 11222-4403

Purpose of Disbursement
Communications Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441730

Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

350.00

SUBTOTAL of Disbursements This Page (optional)

658.97

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)

PAGE 20 / 27

<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)
VOTEVETS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Eric Schmeltzer</p> <hr/> <p>Mailing Address 75 Sutton St # 1</p> <hr/> <p>City Brooklyn State NY Zip Code 11222-4403</p> <hr/> <p>Purpose of Disbursement Communications Services</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto;"></div> <p>Category/ Type</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441731</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px;"> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">10</div> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">15</div> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">2010</div> </div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 5px; text-align: right;">350.00</div>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Eric Schmeltzer</p> <hr/> <p>Mailing Address 75 Sutton St # 1</p> <hr/> <p>City Brooklyn State NY Zip Code 11222-4403</p> <hr/> <p>Purpose of Disbursement Communications Services</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto;"></div> <p>Category/ Type</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441732</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px;"> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">10</div> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">29</div> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">2010</div> </div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 5px; text-align: right;">350.00</div>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Eric Schmeltzer</p> <hr/> <p>Mailing Address 75 Sutton St # 1</p> <hr/> <p>City Brooklyn State NY Zip Code 11222-4403</p> <hr/> <p>Purpose of Disbursement Communications Services</p> <hr/> <p>Candidate Name</p> <div style="border: 1px solid black; width: 50px; height: 20px; margin-left: auto;"></div> <p>Category/ Type</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D441805</p> <p>Date of Disbursement</p> <div style="border: 1px solid black; padding: 2px;"> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">11</div> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">15</div> <div style="display: inline-block; border: 1px solid black; padding: 0 5px;">2010</div> </div> <hr/> <p>Amount of Each Disbursement this Period</p> <div style="border: 1px solid black; padding: 5px; text-align: right;">350.00</div>

SUBTOTAL of Disbursements This Page (optional)

1050.00

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)

PAGE 21 / 27

<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)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)
Evans & Katz LLC

Mailing Address 1831 Bay Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Accounting Services
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441699

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

67.50

B.

Full Name (Last, First, Middle Initial)
Evans & Katz LLC

Mailing Address 1831 Bay Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Accounting Services
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441700

Date of Disbursement

11 / 15 / 2010

Amount of Each Disbursement this Period

247.50

C.

Full Name (Last, First, Middle Initial)
Les MacDonald

Mailing Address 1111 Locust Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Strategic Management Services
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441726

Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

625.00

SUBTOTAL of Disbursements This Page (optional)

940.00

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)

PAGE 22 / 27

<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)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)

Les MacDonald

Mailing Address 1111 Locust Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Strategic Management Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441727

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

625.00

B.

Full Name (Last, First, Middle Initial)

Les MacDonald

Mailing Address 1111 Locust Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Strategic Management Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441728

Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

625.00

C.

Full Name (Last, First, Middle Initial)

Les MacDonald

Mailing Address 1111 Locust Street

City Philadelphia State PA Zip Code 19107

Purpose of Disbursement
Strategic Management Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441729

Date of Disbursement

11 / 15 / 2010

Amount of Each Disbursement this Period

625.00

SUBTOTAL of Disbursements This Page (optional)

1875.00

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)

PAGE 23 / 27

<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)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)

Peter Mellman

Mailing Address 1425 NW 19th Ave
#11

City Portland State OR Zip Code 97209

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441806

Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

325.00

B.

Full Name (Last, First, Middle Initial)

Peter Mellman

Mailing Address 1425 NW 19th Ave
#11

City Portland State OR Zip Code 97209

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441807

Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

325.00

C.

Full Name (Last, First, Middle Initial)

Peter Mellman

Mailing Address 1425 NW 19th Ave
#11

City Portland State OR Zip Code 97209

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441808

Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional)

975.00

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)

PAGE 24 / 27

<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)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)
Peter Mellman

Mailing Address 1425 NW 19th Ave
#11

City Portland State OR Zip Code 97209

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441809

Date of Disbursement

/ /

Amount of Each Disbursement this Period

325.00

B.

Full Name (Last, First, Middle Initial)
Lindsay Patross

Mailing Address 6015 Walnut St.

City Pittsburgh State PA Zip Code 15206

Purpose of Disbursement
Website Management Fee

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441709

Date of Disbursement

/ /

Amount of Each Disbursement this Period

130.00

C.

Full Name (Last, First, Middle Initial)
Solidarity Strategies

Mailing Address 501 3rd Street, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Fundraising Services

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441707

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

955.00

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)

PAGE 25 / 27

<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)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)
Jonathan Soltz

Mailing Address 5290 Duke Street

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Strategic Management Services
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441710
Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

492.00

B.

Full Name (Last, First, Middle Initial)
Jonathan Soltz

Mailing Address 5290 Duke Street

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Strategic Management Services
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441711
Date of Disbursement

10 / 15 / 2010

Amount of Each Disbursement this Period

492.00

C.

Full Name (Last, First, Middle Initial)
Jonathan Soltz

Mailing Address 5290 Duke Street

City Alexandria State VA Zip Code 22304

Purpose of Disbursement
Strategic Management Services
Candidate Name

Category/
Type

Office Sought: ☐ House ☐ Senate ☐ President
State: District:
Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: D441712
Date of Disbursement

10 / 29 / 2010

Amount of Each Disbursement this Period

492.00

SUBTOTAL of Disbursements This Page (optional)

1476.00

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)

PAGE 26 / 27

<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)
VOTEVETS

A. Full Name (Last, First, Middle Initial) Jonathan Soltz	Transaction ID: D441713 Date of Disbursement
Mailing Address 5290 Duke Street	<div> <div>11</div> <div>15</div> <div>2010</div> </div>
City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period
Purpose of Disbursement Strategic Management Services Candidate Name	<div>492.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Wired for Change	Transaction ID: D441695 Date of Disbursement
Mailing Address 1700 Connecticut Ave NW Suite 403	<div> <div>10</div> <div>01</div> <div>2010</div> </div>
City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period
Purpose of Disbursement Database Software & Support Candidate Name	<div>100.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Wired for Change	Transaction ID: D441696 Date of Disbursement
Mailing Address 1700 Connecticut Ave NW Suite 403	<div> <div>11</div> <div>01</div> <div>2010</div> </div>
City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period
Purpose of Disbursement Database Software & Support Candidate Name	<div>100.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

692.00

TOTAL This Period (last page this line number only)

9102.90

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)

PAGE 27 / 27

<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)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)
TIM WALZ FOR US CONGRESS

Mailing Address PO BOX 938

City MANKATO State MN Zip Code 56002

Purpose of Disbursement
Contribution

Candidate Name
Tim Walz

Office Sought: ☒ House
☐ Senate
☐ President

State: MN District: 01

Disbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

Category/
Type

Transaction ID: D441708

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)