



"Karen Blackistone" <kab@holtzmanlaw.net> on 10/22/2008 01:02:11 PM

To: <2022190174@fec.gov>
cc:

Subject: Electioneering Communications Report- 10.22.08

Attached, please find the electioneering communications report for the ad "Hearings," filed on behalf of Vets for Freedom.

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fecfrm9- Hearings-10-21-08..pdf

28039890144

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name Vets for Freedom, Inc.

(b) Address (number and street) check if different than previously reported
1200 Eton Court NW, Suite 300

(c) City, State and ZIP Code
Washington, DC 20007

(d) Name of Employer or Principal Place of Business
NA

(e) Occupation

2. FEC Identification Number

C 30001093

3. Is This Statement New
or
 Amended

4. Covering Period

10 / 17 / 2008
through

10 / 21 / 2008

5. (a) Date of Public Distribution(s) 10 / 21 / 2008 (b) Communication Title "Hearings"

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name Wade Zirkle

(b) Address (number and street)
1200 Eton Court, NW Suite 300

(c) City, State and ZIP Code
Washington, DC 20007

(d) Name of Employer or Principal Place of Business
Lehman Brothers

(e) Occupation

Banking

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

461,205.10

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Pete Hegseth

SIGNATURE

Pete Hegseth

DATE

10-22-2008

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

28039890145

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

PAGE 2 OF 4

11. Person(s) Sharing/Exercising Control

A.	(a) Name Pete Hegseth	
	(b) Address (number and street) 1200 Eton Court, NW Suite 300	
	(c) City, State and ZIP Code Washington, DC 20007	
	(d) Name of Employer or Principal Place of Business Vets for Freedom	(e) Occupation Chairman
B.	(a) Name Wade Zirkle	
	(b) Address (number and street) 1200 Eton Court, NW Suite 300	
	(c) City, State and ZIP Code Washington, DC 20007	
	(d) Name of Employer or Principal Place of Business Lehman Brothers	(e) Occupation Banking
C.	(a) Name Kevin Nunnally	
	(b) Address (number and street) 1200 Eton Court, NW Suite 300	
	(c) City, State and ZIP Code Washington, DC 20007	
	(d) Name of Employer or Principal Place of Business Student	(e) Occupation
D.	(a) Name David Bellavia	
	(b) Address (number and street) 1200 Eton Court, NW Suite 300	
	(c) City, State and ZIP Code Washington, DC 20007	
	(d) Name of Employer or Principal Place of Business Vets for Freedom	(e) Occupation Vice Chairman
E.	(a) Name	
	(b) Address (number and street)	
	(c) City, State and ZIP Code	
	(d) Name of Employer or Principal Place of Business	(e) Occupation

28039890146

SCHEDULE 9-A
Donation(s) Received

28039890147

A. Full Name of Donor
None

Mailing Address of Donor

City State Zip

Date of Receipt

MM / DD / YYYY

Amount

B. Full Name of Donor

Mailing Address of Donor

City State Zip

Date of Receipt

MM / DD / YYYY

Amount

C. Full Name of Donor

Mailing Address of Donor

City State Zip

Date of Receipt

MM / DD / YYYY

Amount

D. Full Name of Donor

Mailing Address of Donor

City State Zip

Date of Receipt

MM / DD / YYYY

Amount

E. Full Name of Donor

Mailing Address of Donor

City State Zip

Date of Receipt

MM / DD / YYYY

Amount

SUBTOTAL of Donations This Page (optional) ▶

TOTAL This Period (last page this line number only) ▶
(carry total from last page to Line 9)

0 00

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

28039890148

A. Full Name (Last, First, Middle Initial) of Payee The Stevens & Schriefer Group			Date of Disbursement or Obligation 10 / 17 / 2008	
Mailing Address of Payee 2120 L St. NW, Suite 510			Amount 4 6 1,2 0 5.10	
City Washington,	State DC	Zip Code 20036	Communication Date 10 / 21 / 2008	
Name of Employer Occupation				

Purpose of Disbursement (Including title(s) of communication(s))

Media placement and Shipping of TV Advertisement: "Hearings"

Name of Federal Candidate Barack Obama	Office Sought: <input checked="" type="checkbox"/> President	House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate	Office Sought:	House Senate President	State: _____ District: _____	Disbursement/Obligation For: Primary General Other (specify) ▶
Name of Federal Candidate	Office Sought:	House Senate President	State: _____ District: _____	Disbursement/Obligation For: Primary General Other (specify) ▶

B. Full Name (Last, First, Middle Initial) of Payee			Date of Disbursement or Obligation	
Mailing Address of Payee			Amount	
City	State	Zip Code	Communication Date	
Name of Employer Occupation				

Purpose of Disbursement (Including title(s) of communication(s))

Name of Federal Candidate	Office Sought:	House Senate President	State: _____ District: _____	Disbursement/Obligation For: Primary General Other (specify) ▶
Name of Federal Candidate	Office Sought:	House Senate President	State: _____ District: _____	Disbursement/Obligation For: Primary General Other (specify) ▶
Name of Federal Candidate	Office Sought:	House Senate President	State: _____ District: _____	Disbursement/Obligation For: Primary General Other (specify) ▶

SUBTOTAL of Disbursements/Obligations This Page (optional) ▶

0.00

TOTAL This Period (last page this line number only) ▶
(carry total from last page to Line 10)

4 6 1,2 0 5.10

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

28039890149

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>E-Mail</i>	Date of Receipt or Postmarked <i>10/22/08</i>
<i>EW</i>	<i>10/22/08</i>
PREPARER	DATE PREPARED