

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 SaysMe, Inc.		3. FEC Identification Number C C00000000
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1291 Electric Ave		
(c) City, State and ZIP Code Venice CA 90291		
2. Corporate filers only Is the filer a qualified nonprofit corporation? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Individual filers only	Name of Employer	Occupation

4. TYPE OF REPORT (check appropriate boxes):	
(a) <input type="checkbox"/> April 15 Quarterly Report	<input type="checkbox"/> 24-Hour Notice <input type="checkbox"/> 48-Hour Notice
<input type="checkbox"/> July 15 Quarterly Report	
<input checked="" type="checkbox"/> October Quarterly Report	
<input type="checkbox"/> January 31 Year-End Report	
(b) Is this Report an amendment? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
5. COVERING PERIOD: FROM ^M 07 / ^D 01 / ^Y 2008	
THROUGH	
^M 09 / ^D 30 / ^Y 2008	
6. TOTAL CONTRIBUTIONS00
7. TOTAL INDEPENDENT EXPENDITURES.....	6999.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in consultation with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a 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
Mr. Matthew William Detisch		10/10/2008

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

28039852424

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee David Dickman	Date M M / D D / Y Y Y Y 09 / 17 / 2008
Mailing Address 8065 Rocky Road	Amount 134.00
City State Zip Code Tillamook OR 97141	

Purpose of Expenditure TV Advertisement - It's Time	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee William M Apfelbaum	Date M M / D D / Y Y Y Y 08 / 10 / 2008
Mailing Address 143 Byram Shore Rd	Amount 250.00
City State Zip Code Greenwich CT 06830	

Purpose of Expenditure It's Time TV Ad	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Cathrine Stack	Date M M / D D / Y Y Y Y 09 / 16 / 2008
Mailing Address 329 West 87 ST	Amount 222.00
City State Zip Code New York NY 10024	

Purpose of Expenditure TV Ad: How Much Time	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	606.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

28039852425

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee David Newkirk		Date M M / D D / Y Y Y Y 09 / 17 / 2008
Mailing Address 15905 W. 56 St		Amount 228.00
City Shawnee	State KS	
Zip Code 66217		
Purpose of Expenditure TV Ad: How Much Time	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Fiona Howe Rudin		Date M M / D D / Y Y Y Y 09 / 18 / 2008
Mailing Address 544 E 86th St		Amount 1544.00
City New York	State NY	
Zip Code 10028		
Purpose of Expenditure TV Ad: How Much Time	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Janice Mekula Golding		Date M M / D D / Y Y Y Y 09 / 13 / 2008
Mailing Address 6574 North State Road 7, #354		Amount 108.00
City Coconut Creek	State FL	
Zip Code 33073		
Purpose of Expenditure TV Ad: How Much Time	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	1880.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

28039852426

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee Karl Glocker		Date M M / D D / Y Y Y Y 09 / 16 / 2008
Mailing Address 183 Bard Road		Amount 140.00
City Pottstown	State PA	
Zip Code 19465		
Purpose of Expenditure TV Ad: How Much Time	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Lisa K Smith		Date M M / D D / Y Y Y Y 09 / 17 / 2008
Mailing Address 328 Riviera Isle Dr		Amount 111.00
City Fort Lauderdale	State FL	
Zip Code 33301		
Purpose of Expenditure TV Ad: How Much Time	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Regina Glocker		Date M M / D D / Y Y Y Y 09 / 16 / 2008
Mailing Address 35 E 68th ST		Amount 1080.00
City New York	State NY	
Zip Code 10065		
Purpose of Expenditure TV AD: How Much Time	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	1331.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

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**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee Fiona Howe Rudin	Date M M / D D / Y Y Y Y 09 / 18 / 2008
Mailing Address 544 E 86 Street	Amount 500.00
City State Zip Code New York NY 10028	

Purpose of Expenditure TV Ad: Abstain	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Martha Teitelbaum	Date M M / D D / Y Y Y Y 09 / 09 / 2008
Mailing Address 2907 Woodstock Ave	Amount 102.00
City State Zip Code Silver Spring MD 20910	

Purpose of Expenditure TV AD: Irony	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee A C Limbach	Date M M / D D / Y Y Y Y 09 / 11 / 2008
Mailing Address 2625 Ridge Rd	Amount 103.00
City State Zip Code Berkley CA 94709	

Purpose of Expenditure TV Ad: I Am Obama	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	705.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

28039852428

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee Ann E Halpin		Date M M / D D / Y Y Y Y 09 / 10 / 2008
Mailing Address 208 E Baseline Rd Apt 209		Amount 148.00
City Tempe	State AZ	
Zip Code 85283		

Purpose of Expenditure TV AD: I Am Obama	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Craig S Holderby		Date M M / D D / Y Y Y Y 09 / 20 / 2008
Mailing Address 3855 Kul Circle South		Amount 104.00
City Hilliard	State OH	
Zip Code 43026		

Purpose of Expenditure TV AD: I Am Obama	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee John James Graff		Date M M / D D / Y Y Y Y 09 / 20 / 2008
Mailing Address 1111 34 ST, NW Apt C		Amount 101.00
City Washington	State DC	
Zip Code 20007		

Purpose of Expenditure TV AD: I Am Obama	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures 353.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

28039852429

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee Josephine V. Nericcio		Date M M / D D / Y Y Y Y 09 / 09 / 2008
Mailing Address 10455 Cumpston St		Amount 112.00
City North Hollywood	State CA	
Zip Code 91601		
Purpose of Expenditure TV AD: I Am Obama	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Karen Molloy		Date M M / D D / Y Y Y Y 09 / 09 / 2008
Mailing Address 9525 Boca River Cir		Amount 132.00
City Boca Raton	State FL	
Zip Code 33434		
Purpose of Expenditure TV AD: I Am Obama	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Lisa Eisenpresser		Date M M / D D / Y Y Y Y 08 / 23 / 2008
Mailing Address 1291 Electric Avenue		Amount 57.00
City Venice	State CA	
Zip Code 90291		
Purpose of Expenditure TV AD: I Am Obama	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures 301.00

(b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

28039852430

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee Wes Hill		Date M M / D D / Y Y Y Y 09 / 27 / 2008
Mailing Address 566 E Channel Rd		Amount 108.00
City Santa Monica	State CA	
Zip Code 90402		
Purpose of Expenditure TV AD: I Am Obama	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jeffrey Martin		Date M M / D D / Y Y Y Y 07 / 02 / 2008
Mailing Address 1291 Electric Ave		Amount 125.00
City Venice	State CA	
Zip Code 90291		
Purpose of Expenditure TV AD: Risky Squirrel	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle initial) of Payee Fiona Howe Rudin		Date M M / D D / Y Y Y Y 09 / 18 / 2008
Mailing Address 544 East 86 ST		Amount 432.00
City New York	State NY	
Zip Code 10028		
Purpose of Expenditure TV Ad: Backwards	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate <input checked="" type="checkbox"/> Presidential District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2008 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	665.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

28039852431

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee
Sheryl Papp

Date

M M / D D / Y Y Y Y
09 / 10 / 2008

Mailing Address
2525 W. Armour Ter.

Amount

118.00

City State Zip Code
St. Anthony MN 55418

Purpose of Expenditure
TV Ad: Backwards

Category/
Type

Office Sought: House State: _____
Presidential Senate District: _____
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Barack Obama

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought .00

Disbursement For: Primary General
2008
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
John O. Morisano

Date

M M / D D / Y Y Y Y
08 / 10 / 2008

Mailing Address
15 Grameracy Park South

Amount

156.00

City State Zip Code
New York NY 10003

Purpose of Expenditure
TV Ad: You Don't Know Bama

Category/
Type

Office Sought: House State: _____
Presidential Senate District: _____
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
Barack Obama

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought .00

Disbursement For: Primary General
2008
 Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee
Martha Davis

Date

M M / D D / Y Y Y Y
09 / 02 / 2008

Mailing Address
3524 Barry Ave

Amount

139.00

City State Zip Code
Los Angeles CA 90066

Purpose of Expenditure
TV Ad: 3am?

Category/
Type

Office Sought: House State: _____
Presidential Senate District: _____
 President

Name of Federal Candidate Supported or Opposed by Expenditure:
John McCain

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought .00

Disbursement For: Primary General
2008
 Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures 413.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

28039852432

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee Rachel Resnikoff	Date M M / D D / Y Y Y Y 09 / 13 / 2008
Mailing Address 26 Tunnel Rd	Amount 382.00
City State Zip Code Berkley CA 94705	

Purpose of Expenditure TV AD: Dear John	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Jonathan D. Pincus	Date M M / D D / Y Y Y Y 08 / 25 / 2008
Mailing Address 13115 NE 36 St	Amount 123.00
City State Zip Code Bellevue WA 98005	

Purpose of Expenditure TV AD: FISA Constitution Ad 2	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Carlos Gutierrez	Date M M / D D / Y Y Y Y 08 / 18 / 2008
Mailing Address 502 S. Poplar	Amount 5.00
City State Zip Code Santa Ana CA 92703	

Purpose of Expenditure TV AD: Im Voting Republican 7	Category/ Type	Office Sought: Presidential <input type="checkbox"/> House State: _____ <input checked="" type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: John McCain		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought .00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures	510.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
(carry total from last page forward to Line 7)	

28039852433

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)

SaysMe, Inc.

Full Name (Last, First, Middle Initial) of Payee

Roberta A White

Date

09 / 17 / 2008

Mailing Address

PO Box 3264

Amount

124.00

City

Oak Park

State

IL

Zip Code

60303

Purpose of Expenditure

TV AD: Im Voting Republican 6

Category/
Type

Office Sought:

House

State: _____

Presidential

Senate

District: _____

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

John McCain

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:
2008

Primary

General

Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Stephanie R Bloom

Date

09 / 17 / 2008

Mailing Address

1421 Oak Grove Ave #101

Amount

111.00

City

Burlingame

State

CA

Zip Code

94010

Purpose of Expenditure

TV AD: Im Voting Republican 5

Category/
Type

Office Sought:

House

State: _____

Presidential

Senate

District: _____

President

Check One:

Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

John McCain

Calendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:
2008

Primary

General

Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures

235.00

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures

6999.00

(carry total from last page forward to Line 7)

28039852434

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.

<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>Web Form # 287</i>	Date of Receipt or Postmarked <i>10/10/08</i>

JAD
 PREPARER

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