

To: Federal Election Commission -2022190174

From: Karen Blackstone

Date: 9-6-08

Re: Vets for Freedom - Form 9 Filing

28039824592

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 Ct. NW Suite 300

(c) City, State and ZIP Code

Washington, DC 20007

(d) Name of Employer or Principal Place of Business

(e) Occupation

2. FEC Identification Number

C

3. Is This Statement

New

or

Amended

4. Covering Period

08 27 2008

through

09 05 2008

5. (a) Date of Public Distribution(s)

09 03 2008

(b) Communication Title

Reenlistment

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 Ct. 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

683,805.00

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

09/05/08

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

FEC FORM 9 (REV. 12/2007)

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11. Person(s) Sharing/Exercising Control

A.	(a) Name <u>Pete Hegseth</u>	(e) Occupation <u>Chairman</u>
	(b) Address (number and street) <u>1200 Eton Ct, NW Suite 300</u>	
	(c) City, State and ZIP Code <u>Washington, DC 20007</u>	
	(d) Name of Employer or Principal Place of Business <u>Vets for Freedom</u>	
B.	(a) Name <u>Wade Zirkle</u>	(e) Occupation <u>Banking</u>
	(b) Address (number and street) <u>1200 Eton Ct, NW Suite 300</u>	
	(c) City, State and ZIP Code <u>Washington, DC 20007</u>	
	(d) Name of Employer or Principal Place of Business <u>Lehman Brothers</u>	
C.	(a) Name <u>Joel Ansd</u>	(e) Occupation <u>Executive Director</u>
	(b) Address (number and street) <u>1200 Eton Ct, NW Suite 300</u>	
	(c) City, State and ZIP Code <u>Washington, DC 20007</u>	
	(d) Name of Employer or Principal Place of Business <u>Vets for Freedom</u>	
D.	(a) Name <u>David Bellavia</u>	(e) Occupation <u>Vice-Chairman</u>
	(b) Address (number and street) <u>1200 Eton Ct, NW Suite 300</u>	
	(c) City, State and ZIP Code <u>Washington, DC 20007</u>	
	(d) Name of Employer or Principal Place of Business <u>Vets for Freedom</u>	
E.	(a) Name <u>Karen Nonally</u>	(e) Occupation <u>Student</u>
	(b) Address (number and street) <u>1200 Eton Ct, NW Suite 300</u>	
	(c) City, State and ZIP Code <u>Washington, DC 20007</u>	
	(d) Name of Employer or Principal Place of Business <u>Student</u>	

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SCHEDULE 9-B
Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee <u>The Stevens + Schriber Group</u>		Date of Disbursement or Obligation <u>08 27 2008</u>
Mailing Address of Payee <u>2120 L St. NW Suite 510</u>		Amount <u>633,805.00</u>
City <u>Washington</u> State <u>DC</u> Zip Code <u>20037</u>	Communication Date <u>09 03 2008</u>	
Name of Employer _____ Occupation _____		
Purpose of Disbursement (Including title(s) of communication(s)) <u>Media placement + ad production</u>		
Name of Federal Candidate <u>Barack Obama</u>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate _____	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate _____	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> 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: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate _____	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Name of Federal Candidate _____	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶		
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)		<u>633,805.00</u>

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Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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