

**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 (12G)

Election on

09

01

2009

in the
State of

CA

(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

☐☐☐in the
State of☐

5. Covering Period

07

01

2009

through

08

12

2009

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

08

19

2009

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 / 17

Write or Type Committee Name
VOTEVETS

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	8

D	D
1	2

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <div>Y Y Y Y 2009</div>		123248.55
(b) Cash on Hand at Beginning of Reporting Period	68714.48	
(c) Total Receipts (from Line 19)	3132.90	29021.09
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	71847.38	152269.64
7. Total Disbursements (from Line 31)	10967.25	91389.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	60880.13	60880.13
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 / 17

Write or Type Committee Name
VOTEVETS

Report Covering the Period:

From:

M M D D Y Y W Y
0 7 0 1 2 0 0 9

To:

M M D D Y Y W Y
0 8 0 1 2 0 0 9

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)	1000.00	7735.01
(ii) Unitemized	2112.00	16265.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3112.00	24000.19
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	3112.00	29000.19
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)	20.90	20.90
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))	3132.90	29021.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3132.90	29021.09

DETAILED SUMMARY PAGE

of Disbursements

5 / 17

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.....	7967.25	49389.51	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	7967.25	49389.51	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	42000.00	
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	0.00	
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))..	10967.25	91389.51	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10967.25	91389.51	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

6 / 17

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)	3112.00	29000.19
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3112.00	29000.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	7967.25	49389.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	20.90	20.90
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7946.35	49368.61

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

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

FOR LINE NUMBER: PAGE 7 / 17

(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)
 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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y
 07 07 2009

Transaction ID: C18109194

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)
 Harry Kamen

Mailing Address 910 Park Avenue

City State Zip Code
 New York NY 10075

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
 08 02 2009

Transaction ID: C18109078A

Amount of Each Receipt this Period

500.00

* Earmarked Contribution:
 See Below

C.

Full Name (Last, First, Middle Initial)
 ACTBLUE

Mailing Address PO Box 382110

City State Zip Code
 Cambridge MA 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 ▼

1384.00

Date of Receipt

M M / D D / Y Y Y Y
 08 02 2009

Transaction ID: C18109078AB

Amount of Each Receipt this Period

500.00

[MEMO ITEM]

Note: Above Contribution
 earmarked through this or-
 ganization.

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

1000.00

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 8 / 17

<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: D379668 Date of Disbursement
Mailing Address 99 Jefferson Rd, Mail Stop 220	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 8 / 2 0 0 9</div> </div>
City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Payroll Fees Candidate Name	Amount of Each Disbursement this Period <div>62.97</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: D379669 Date of Disbursement
Mailing Address 99 Jefferson Rd, Mail Stop 220	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 9</div> </div>
City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Payroll Taxes Candidate Name	Amount of Each Disbursement this Period <div>185.47</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: D379670 Date of Disbursement
Mailing Address 99 Jefferson Rd, Mail Stop 220	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 2 / 2 0 0 9</div> </div>
City Parsippany State NJ Zip Code 07054 Purpose of Disbursement Payroll Fees Candidate Name	Amount of Each Disbursement this Period <div>60.97</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)

309.41

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 PageFOR LINE NUMBER:
(check only one)

PAGE 9 / 17

<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: D379671 Date of Disbursement																				
Mailing Address 99 Jefferson Rd, Mail Stop 220	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		3	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		3	0		2	0	0	9												
City Parsippany State NJ Zip Code 07054	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Fees Candidate Name	<table border="1"> <tr> <td colspan="10">185.47</td> </tr> </table>	185.47																			
185.47																					
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) ADP	Transaction ID: D379672 Date of Disbursement																				
Mailing Address 99 Jefferson Rd, Mail Stop 220	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	5		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	5		2	0	0	9												
City Parsippany State NJ Zip Code 07054	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Fees Candidate Name	<table border="1"> <tr> <td colspan="10">60.97</td> </tr> </table>	60.97																			
60.97																					
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) AmperSand Consulting	Transaction ID: D379676 Date of Disbursement																				
Mailing Address 158 44th Street	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	3		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	3		2	0	0	9												
City Pittsburgh State PA Zip Code 15201	Amount of Each Disbursement this Period																				
Purpose of Disbursement Website Management Fee Candidate Name	<table border="1"> <tr> <td colspan="10">634.50</td> </tr> </table>	634.50																			
634.50																					
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)

880.94

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 10 / 17

<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) AT&T Mobility	Transaction ID: D379679 Date of Disbursement
Mailing Address PO Box 6463	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 9</div> </div>
City State Zip Code Carol Stream IL 60197 Purpose of Disbursement Mobile Phone Service Candidate Name	Amount of Each Disbursement this Period <div>47.06</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) Bank of America	Transaction ID: D379663 Date of Disbursement
Mailing Address 56 E 42nd St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 0 9</div> </div>
City State Zip Code New York NY 10017-5407 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Amount of Each Disbursement this Period <div>106.98</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) Bank of America	Transaction ID: D379664 Date of Disbursement
Mailing Address 56 E 42nd St	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 2 0 / 2 0 0 9</div> </div>
City State Zip Code New York NY 10017-5407 Purpose of Disbursement Credit Card Processing Fees Candidate Name	Amount of Each Disbursement this Period <div>1155.00</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) ▼	<div>Category/Type</div>

SUBTOTAL of Disbursements This Page (optional)

1309.04

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 11 / 17

<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) Bank of America</p> <p>Mailing Address 56 E 42nd St</p> <p>City New York State NY Zip Code 10017-5407</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: D379665</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="124.77"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Blackrock Associates, LLC</p> <p>Mailing Address 1936 University Ave. Suite 191</p> <p>City Berkeley State CA Zip Code 94704</p> <p>Purpose of Disbursement Database Software & Support</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: D379675</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="175.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Eric Schmeltzer</p> <p>Mailing Address 75 Sutton St # 1</p> <p>City Brooklyn State NY Zip Code 11222-4403</p> <p>Purpose of Disbursement Communications Services</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: D379687</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>

SUBTOTAL of Disbursements This Page (optional)

599.77

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 PageFOR LINE NUMBER:
(check only one)

PAGE 12 / 17

<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)
Eric SchmeltzerMailing Address 75 Sutton St
1

City Brooklyn State NY Zip Code 11222-4403

Purpose of Disbursement
Communications Services

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D379688

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

Amount of Each Disbursement this Period

300.00

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/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D379681

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	9

Amount of Each Disbursement this Period

233.75

C.

Full Name (Last, First, Middle Initial)
Brandon FriedmanMailing Address 4975 Morris Ave.
Apt 3343

City Addison State TX Zip Code 75001

Purpose of Disbursement
Salary

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: D379693

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	0	9

Amount of Each Disbursement this Period

225.00

SUBTOTAL of Disbursements This Page (optional)

758.75

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 17

<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) Brandon Friedman</p> <p>Mailing Address 4975 Morris Ave. Apt 3343</p> <p>City Addison State TX Zip Code 75001</p> <p>Purpose of Disbursement Salary</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: D379694</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="225.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Peter Granato</p> <p>Mailing Address 1701 16th Street NW Apt. 704</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Salary</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: D379691</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="242.35"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Peter Granato</p> <p>Mailing Address 1701 16th Street NW Apt. 704</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement Salary</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: D379692</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="9"/> <input type="text" value="9"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="242.35"/></p>

SUBTOTAL of Disbursements This Page (optional)

709.70

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 14 / 17

<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 One Caryl Lane

City Philadelphia State PA Zip Code 19118

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: D379685

Date of Disbursement

07 / 14 / 2009

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Les MacDonald

Mailing Address One Caryl Lane

City Philadelphia State PA Zip Code 19118

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: D379686

Date of Disbursement

07 / 30 / 2009

Amount of Each Disbursement this Period

600.00

C.

Full Name (Last, First, Middle Initial)

Brian McGough

Mailing Address 43190 Arbor Greene Way

City Ashburn State VA Zip Code 20148

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D379695

Date of Disbursement

07 / 14 / 2009

Amount of Each Disbursement this Period

150.00

SUBTOTAL of Disbursements This Page (optional)

1350.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 15 / 17

<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) Brian McGough	Transaction ID: D379696 Date of Disbursement
Mailing Address 43190 Arbor Greene Way	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 9</div> </div>
City Ashburn State VA Zip Code 20148 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <div>150.00</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) Peter Mellman	Transaction ID: D379689 Date of Disbursement
Mailing Address 520 Buchanan Street #12	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 9</div> </div>
City San Francisco State CA Zip Code 94102 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <div>300.00</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) Peter Mellman	Transaction ID: D379690 Date of Disbursement
Mailing Address 520 Buchanan Street #12	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 9</div> </div>
City San Francisco State CA Zip Code 94102 Purpose of Disbursement Salary Candidate Name	Amount of Each Disbursement this Period <div>300.00</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)

750.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 16 / 17

<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) Oxford Health Insurance Co.	Transaction ID: D379680 Date of Disbursement
Mailing Address 2721 N Central Ave	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 9</div> </div>
City Phoenix State AZ Zip Code 85004-1121	Amount of Each Disbursement this Period
Purpose of Disbursement Health Insurance	<div>212.46</div>
Candidate Name	<div>Category/Type</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) Jonathan Soltz	Transaction ID: D379683 Date of Disbursement
Mailing Address 5290 Duke Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 4 / 2 0 0 9</div> </div>
City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>467.35</div>
Candidate Name	<div>Category/Type</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) Jonathan Soltz	Transaction ID: D379684 Date of Disbursement
Mailing Address 5290 Duke Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 0 9</div> </div>
City Alexandria State VA Zip Code 22304	Amount of Each Disbursement this Period
Purpose of Disbursement Salary	<div>467.35</div>
Candidate Name	<div>Category/Type</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)

1147.16

TOTAL This Period (last page this line number only)

7814.77

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

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Detailed Summary Page

FOR LINE NUMBER:
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PAGE 17 / 17

<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
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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Full Name (Last, First, Middle Initial)
ANTHONY WOODS FOR CONGRESS

Mailing Address P.O. Box 28

City Fairfield State CA Zip Code 94533

Purpose of Disbursement
Contribution

Candidate Name
Anthony Woods

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2009
☐ Primary ☐ General
☒ Other (specify) ▼
Special

State: CA District: 10

Transaction ID: D379678

Date of Disbursement

07 / 24 / 2009

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
PATRICK MURPHY FOR CONGRESS

Mailing Address PO Box 868

City Levittown State PA Zip Code 19058-0868

Purpose of Disbursement
Contribution

Candidate Name
Patrick Murphy

Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

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

State: PA District: 08

Transaction ID: D379682

Date of Disbursement

08 / 11 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

3000.00