

**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

07

01

2010

through

09

30

2010

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

10

15

2010

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 / 34

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	1	0

 To:

M	M
0	9

D	D
3	0

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	60249.36	
(c) Total Receipts (from Line 19)	17685.01	66460.18
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77934.37	121162.62
7. Total Disbursements (from Line 31)	25738.88	68967.13
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	52195.49	52195.49
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)

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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	1	0

To:

M	M
0	9

D	D
3	0

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)	2350.00	8500.00
(ii) Unitemized	2835.01	15460.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5185.01	23960.18
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	12500.00	42500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17685.01	66460.18
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))	17685.01	66460.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	17685.01	66460.18

DETAILED SUMMARY PAGE

of Disbursements

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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.....	15288.88	43017.13	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	15288.88	43017.13	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	25000.00	
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.....	950.00	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))..	25738.88	68967.13	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25738.88	68967.13	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	17685.01	66460.18
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17685.01	66460.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	15288.88	43017.13
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15288.88	43017.13

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

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

FOR LINE NUMBER: PAGE 7 / 34

(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)
 Richard Jones

Mailing Address 200 North Gaines Road

City State Zip Code
 Cedar Creek, TX 78612

FEC ID number of contributing
federal political committee.

C

Name of Employer
Self Employed

Occupation
Personal Investments

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y
 0 9 / 0 3 / 2 0 1 0

Transaction ID: C18923141

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 ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 7 / 3 1 / 2 0 1 0

Transaction ID: C18796338

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 ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 0 8 / 2 3 / 2 0 1 0

Transaction ID: C18923104

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1750.00

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 / 34

(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

Bellevue

State

WA

Zip Code

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 ▼

600.00

Date of Receipt

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

Transaction ID: C18796357

Amount of Each Receipt this Period

100.00

B.

Full Name (Last, First, Middle Initial)

Donald Merino

Mailing Address 10058 Se 16th St

City

Bellevue

State

WA

Zip Code

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 ▼

600.00

Date of Receipt

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

Transaction ID: C18923101

Amount of Each Receipt this Period

100.00

C.

Full Name (Last, First, Middle Initial)

Donald Merino

Mailing Address 10058 Se 16th St

City

Bellevue

State

WA

Zip Code

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 ▼

600.00

Date of Receipt

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

Transaction ID: C18923122

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional)

300.00

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 / 34

(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 ▼

600.00

Date of Receipt

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

Transaction ID: C18751688A

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 ▼

455.01

Date of Receipt

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

Transaction ID: C18751688AB

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 ▼

600.00

Date of Receipt

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

Transaction ID: C18860437A

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 10 / 34

(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)

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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

455.01

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 1 5 / 2 0 1 0

Transaction ID: C18860437AB

Amount of Each Receipt this Period

100.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

B.

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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: C18911405A

Amount of Each Receipt this Period

100.00

* 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
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

455.01

Date of Receipt

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

Transaction ID: C18911405AB

Amount of Each Receipt this Period

100.00

[MEMO ITEM]

Note: Above Contribution
earmarked through this or-
ganization.

SUBTOTAL of Receipts This Page (optional)

100.00

TOTAL This Period (last page this line number only)

2350.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 34

(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)
AMERICAN FEDERATION OF GOVT. EMPL. POLITICAL ACTIO
Mailing Address 80 F Street NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee. **C** C00009936

Name of Employer Occupation

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

Aggregate Year-to-Date ▼
2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 8 / 0 6 / 2 0 1 0

Transaction ID: C18860488

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)
MACHINISTS NON PARTISAN POL LEAGUE OF THE INT'L ASSN OF MACHINISTS & AEROSPACE WORKERS
Mailing Address 9000 Machinists PI

City State Zip Code
Upper Marlboro MD 20772-2675

FEC ID number of contributing
federal political committee. **C** C00002469

Name of Employer Occupation

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: C18911436

Amount of Each Receipt this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNI
Mailing Address 1775 K STREET N.W.

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee. **C** C00002766

Name of Employer Occupation

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

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

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

Transaction ID: C18860473

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional)

12500.00

TOTAL This Period (last page this line number only)

12500.00

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)

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<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: D419183</p> <p>Date of Disbursement 07 / 11 / 2010</p> <p>Amount of Each Disbursement this Period 3.95</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: D419651</p> <p>Date of Disbursement 07 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 1.76</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: D422772</p> <p>Date of Disbursement 08 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 3.95</p>

SUBTOTAL of Disbursements This Page (optional) ►

9.66

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 13 / 34

<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: D428853</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>08222010</div> </p> <p>Amount of Each Disbursement this Period <div>1.16</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: D429006</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>09062010</div> </p> <p>Amount of Each Disbursement this Period <div>0.99</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: D429009</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>09122010</div> </p> <p>Amount of Each Disbursement this Period <div>3.95</div> </p>

SUBTOTAL of Disbursements This Page (optional) ►

6.10

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)

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<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

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

<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</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: D429012</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>09262010</div> </p> <p>Amount of Each Disbursement this Period <div>1.65</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</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: D429014</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>09302010</div> </p> <p>Amount of Each Disbursement this Period <div>0.60</div> </p>
<p>C.</p> <p>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: D430745</p> <p>Date of Disbursement <div> <div>M M</div> <div>D D</div> <div>Y Y Y Y</div> </div> <div>08042010</div> </p> <p>Amount of Each Disbursement this Period <div>59.07</div> </p>

SUBTOTAL of Disbursements This Page (optional)

61.32

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)

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<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: D430746 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>1</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	2		2	0	1	0												
City Parsippany State NJ Zip Code 07054	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"> <tr> <td colspan="10">66.28</td> </tr> </table>	66.28																			
66.28																					
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: D430747 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>1</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	1	0												
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">59.07</td> </tr> </table>	59.07																			
59.07																					
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) ADP	Transaction ID: D430748 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>3</td><td>1</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		3	1		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		3	1		2	0	1	0												
City Parsippany State NJ Zip Code 07054	Amount of Each Disbursement this Period																				
Purpose of Disbursement Payroll Taxes Candidate Name	<table border="1"> <tr> <td colspan="10">66.28</td> </tr> </table>	66.28																			
66.28																					
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)

191.63

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)

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<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

Mailing Address 99 Jefferson Rd, Mail Stop 220

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement

Payroll Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D430749

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.07

B.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 99 Jefferson Rd, Mail Stop 220

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D430750

Date of Disbursement

/ /

Amount of Each Disbursement this Period

66.28

C.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 99 Jefferson Rd, Mail Stop 220

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement

Payroll Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D430751

Date of Disbursement

/ /

Amount of Each Disbursement this Period

59.07

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)

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<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

Mailing Address 99 Jefferson Rd, Mail Stop 220

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D430752

Date of Disbursement

/ /

Amount of Each Disbursement this Period

66.30

B.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 99 Jefferson Rd, Mail Stop 220

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement

Payroll Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D420499

Date of Disbursement

/ /

Amount of Each Disbursement this Period

61.07

C.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 99 Jefferson Rd, Mail Stop 220

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D420500

Date of Disbursement

/ /

Amount of Each Disbursement this Period

66.28

SUBTOTAL of Disbursements This Page (optional)

193.65

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)

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<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

Mailing Address 99 Jefferson Rd, Mail Stop 220

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement

Payroll Fees

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D420501

Date of Disbursement

07 / 21 / 2010

Amount of Each Disbursement this Period

59.07

B.

Full Name (Last, First, Middle Initial)
ADP

Mailing Address 99 Jefferson Rd, Mail Stop 220

City Parsippany State NJ Zip Code 07054

Purpose of Disbursement

Payroll Taxes

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D420502

Date of Disbursement

07 / 29 / 2010

Amount of Each Disbursement this Period

66.30

C.

Full Name (Last, First, Middle Initial)
AT&T Mobility

Mailing Address PO Box 6463

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement

Mobile Phone Service

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D430759

Date of Disbursement

09 / 01 / 2010

Amount of Each Disbursement this Period

52.90

SUBTOTAL of Disbursements This Page (optional)

178.27

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)

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<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) Authorize.net</p> <p>Mailing Address 915 S 500 E Ste 200</p> <p>City American Fork State UT Zip Code 84003-3373</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: D430743</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 20.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 915 S 500 E Ste 200</p> <p>City American Fork State UT Zip Code 84003-3373</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: D430744</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 20.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Authorize.net</p> <p>Mailing Address 915 S 500 E Ste 200</p> <p>City American Fork State UT Zip Code 84003-3373</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: D420498</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 2 / 2 0 1 0</p> <p>Amount of Each Disbursement this Period 20.00</p>

SUBTOTAL of Disbursements This Page (optional)

60.00

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)

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<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: D420495

Date of Disbursement

/ /

Amount of Each Disbursement this Period

100.63

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: D430734

Date of Disbursement

/ /

Amount of Each Disbursement this Period

544.56

C.

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: D430735

Date of Disbursement

/ /

Amount of Each Disbursement this Period

87.31

SUBTOTAL of Disbursements This Page (optional)

732.50

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 / 34

<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 Schmeltzer

Mailing Address 75 Sutton St
1

City Brooklyn State NY Zip Code 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: D420519

Date of Disbursement

07 / 01 / 2010

Amount of Each Disbursement this Period

350.00

B.

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

Mailing Address 75 Sutton St
1

City Brooklyn State NY Zip Code 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: D420520

Date of Disbursement

07 / 15 / 2010

Amount of Each Disbursement this Period

350.00

C.

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

Mailing Address 75 Sutton St
1

City Brooklyn State NY Zip Code 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: D420521

Date of Disbursement

07 / 30 / 2010

Amount of Each Disbursement this Period

350.00

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)

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<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 Schmeltzer

Mailing Address 75 Sutton St
1

City Brooklyn State NY Zip Code 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: D430781

Date of Disbursement

08 / 15 / 2010

Amount of Each Disbursement this Period

350.00

B.

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

Mailing Address 75 Sutton St
1

City Brooklyn State NY Zip Code 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: D430782

Date of Disbursement

09 / 01 / 2010

Amount of Each Disbursement this Period

350.00

C.

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

Mailing Address 75 Sutton St
1

City Brooklyn State NY Zip Code 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: D430783

Date of Disbursement

09 / 15 / 2010

Amount of Each Disbursement this Period

350.00

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)

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<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	Transaction ID: D430755 Date of Disbursement
Mailing Address 1831 Bay Street, SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 1 1 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Accounting Services Candidate Name	<div> <div>382.50</div> <div>Category/Type</div> </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) Evans & Katz LLC	Transaction ID: D430756 Date of Disbursement
Mailing Address 1831 Bay Street, SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 9 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Accounting Services Candidate Name	<div> <div>180.00</div> <div>Category/Type</div> </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) Evans & Katz LLC	Transaction ID: D420503 Date of Disbursement
Mailing Address 1831 Bay Street, SE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 2 / 2 0 1 0</div> </div>
City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
Purpose of Disbursement Accounting Services Candidate Name	<div> <div>217.04</div> <div>Category/Type</div> </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)

779.54

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)

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<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	Transaction ID: D420513 Date of Disbursement
Mailing Address One Caryl Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div>
City Philadelphia State PA Zip Code 19118 Purpose of Disbursement Strategic Management Services Candidate Name	Amount of Each Disbursement this Period <div>625.00</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) Les MacDonald	Transaction ID: D420514 Date of Disbursement
Mailing Address One Caryl Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 1 5 / 2 0 1 0</div> </div>
City Philadelphia State PA Zip Code 19118 Purpose of Disbursement Strategic Management Services Candidate Name	Amount of Each Disbursement this Period <div>625.00</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) Les MacDonald	Transaction ID: D420515 Date of Disbursement
Mailing Address One Caryl Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 3 0 / 2 0 1 0</div> </div>
City Philadelphia State PA Zip Code 19118 Purpose of Disbursement Strategic Management Services Candidate Name	Amount of Each Disbursement this Period <div>625.00</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)

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)

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<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: D430785

Date of Disbursement

08 / 13 / 2010

Amount of Each Disbursement this Period

625.00

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: D430786

Date of Disbursement

09 / 01 / 2010

Amount of Each Disbursement this Period

625.00

C.

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: D430788

Date of Disbursement

09 / 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)

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<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: D430790

Date of Disbursement

08 / 13 / 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: D430791

Date of Disbursement

09 / 01 / 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: D430792

Date of Disbursement

09 / 15 / 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)

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<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

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

State: District:

Transaction ID: D420510

Date of Disbursement

07 / 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

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

State: District:

Transaction ID: D420511

Date of Disbursement

07 / 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

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

State: District:

Transaction ID: D420512

Date of Disbursement

07 / 30 / 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)

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<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)
NGP Software, Inc.

Mailing Address 1101 Vermont Ave NW
Ste 710

City Washington State DC Zip Code 20005-3521

Purpose of Disbursement
Software & Support

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D430761

Date of Disbursement

09 / 09 / 2010

Amount of Each Disbursement this Period

105.00

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: D430738

Date of Disbursement

08 / 02 / 2010

Amount of Each Disbursement this Period

130.00

C.

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: D430739

Date of Disbursement

08 / 31 / 2010

Amount of Each Disbursement this Period

130.00

SUBTOTAL of Disbursements This Page (optional)

365.00

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 29 / 34

<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)

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: D430740

Date of Disbursement

/ /

Amount of Each Disbursement this Period

130.00

B.

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: D430753

Date of Disbursement

/ /

Amount of Each Disbursement this Period

750.00

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: D430754

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

1380.00

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 30 / 34

<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: D420516

Date of Disbursement

/ /

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: D420517

Date of Disbursement

/ /

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: D420518

Date of Disbursement

/ /

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)

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<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: D430777

Date of Disbursement

08 / 13 / 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: D430778

Date of Disbursement

09 / 01 / 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: D430780

Date of Disbursement

09 / 15 / 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)

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<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) Wired for Change</p> <p>Mailing Address 1700 Connecticut Ave NW Suite 403</p> <p>City Washington State DC Zip Code 20009</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D420496 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 7 / 0 1 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>100.00</div> </p>
<p>B. Full Name (Last, First, Middle Initial) Wired for Change</p> <p>Mailing Address 1700 Connecticut Ave NW Suite 403</p> <p>City Washington State DC Zip Code 20009</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D430736 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 8 / 0 2 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>100.00</div> </p>
<p>C. Full Name (Last, First, Middle Initial) Wired for Change</p> <p>Mailing Address 1700 Connecticut Ave NW Suite 403</p> <p>City Washington State DC Zip Code 20009</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 State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: D430737 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 0 1 / 2 0 1 0</div> </div> </p> <p>Amount of Each Disbursement this Period <div>100.00</div> </p>

SUBTOTAL of Disbursements This Page (optional)

300.00

TOTAL This Period (last page this line number only)

15194.09

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)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Full Name (Last, First, Middle Initial) BOCCIERI FOR CONGRESS <hr/> Mailing Address PO BOX 3016	Transaction ID: D430765 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 1 0</div> </div>
<div> <div>City Alliance State OH Zip Code 44601</div> <div> <div>Purpose of Disbursement Contribution</div> <div>Candidate Name John Bocchieri</div> <div> <div>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div> </div> <div> <div>State: OH District: 16</div> <div>Category/Type</div> </div> </div>	Amount of Each Disbursement this Period <div>2500.00</div>
B. Full Name (Last, First, Middle Initial) Carney for Congress <hr/> Mailing Address PO Box A	Transaction ID: D430764 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 1 0</div> </div>
<div> <div>City Clarks Summit State PA Zip Code 18411</div> <div> <div>Purpose of Disbursement Contribution</div> <div>Candidate Name Chris Carney</div> <div> <div>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div> </div> <div> <div>State: PA District: 10</div> <div>Category/Type</div> </div> </div>	Amount of Each Disbursement this Period <div>3000.00</div>
C. Full Name (Last, First, Middle Initial) PATRICK MURPHY FOR CONGRESS <hr/> Mailing Address PO Box 868	Transaction ID: D430763 Date of Disbursement <div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 3 0 / 2 0 1 0</div> </div>
<div> <div>City Levittown State PA Zip Code 19058-0868</div> <div> <div>Purpose of Disbursement Contribution</div> <div>Candidate Name Patrick Murphy</div> <div> <div>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</div> <div>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</div> </div> </div> <div> <div>State: PA District: 08</div> <div>Category/Type</div> </div> </div>	Amount of Each Disbursement this Period <div>4000.00</div>

SUBTOTAL of Disbursements This Page (optional)

9500.00

TOTAL This Period (last page this line number only)

9500.00

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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
VOTEVETS

A.

Full Name (Last, First, Middle Initial)
Committee to Elect Steve Hobbs

Mailing Address 3309 114th Drive NE

City Lake Stevens State WA Zip Code 98258

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D420509

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Friends Of Aaron Bailey

Mailing Address PO Box 2147

City Royal Oak State MI Zip Code 48068

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

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

Transaction ID: D430762

Date of Disbursement

/ /

Amount of Each Disbursement this Period

450.00

SUBTOTAL of Disbursements This Page (optional)

950.00

TOTAL This Period (last page this line number only)

950.00