

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

VOTEVETS

ADDRESS (number and street) PO Box 75357

Check if different than previously reported. (ACC) Washington DC 20002

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00418897

3. IS THIS REPORT NEW OR AMENDED (N) (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 Year-End Report (YE)
July 31 Mid-Year Report (Non-election Year Only) (MY)
Termination Report (TER)

- (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on 11 / 08 / 2016 in the State of DC

- (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on / / in the State of

5. Covering Period 10 / 01 / 2016 through 10 / 19 / 2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Hegdahl, Rick, , ,

Type or Print Name of Treasurer

Signature of Treasurer Hegdahl, Rick, , , [Electronically Filed] Date 10 / 27 / 2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Table with 10 columns for Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

VOTEVETS

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		81142.06
(b) Cash on Hand at Beginning of Reporting Period.....	242869.93	
(c) Total Receipts (from Line 19)	3755067.18	8124837.49
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	3997937.11	8205979.55
7. Total Disbursements (from Line 31).....	3499415.24	7707457.68
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	498521.87	498521.87
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)	37130.83	

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

Write or Type Committee Name

VOTEVETS

Report Covering the Period: From: 10 / 01 / 2016 To: 10 / 19 / 2016

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).....	8790.00	44493.50
(ii) Unitemized	34317.59	190151.24
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	43107.59	234644.74
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	10000.00	35000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	53107.59	269644.74
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	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3701959.59	7850192.75
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 Transfers (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)).....▶	3755067.18	8124837.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	3755067.18	8124837.49

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	15136.82	1962435.78
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	15136.82	1962435.78
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	87500.00
24. Independent Expenditures (use Schedule E)	3378478.82	5536223.30
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	2350.00	8350.00
(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)).....	2350.00	8350.00
29. Other Disbursements (Including Non-Federal Donations).....	103449.60	112948.60
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	3499415.24	7707457.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3499415.24	7707457.68

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

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)	53107.59	269644.74
34. Total Contribution Refunds (from Line 28(d))	2350.00	8350.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50757.59	261294.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	15136.82	1962435.78
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	15136.82	1962435.78

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

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

FOR LINE NUMBER: PAGE 6 OF 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Campbell, Judith, , ,

Mailing Address 19882 W Highway 149

City Hedrick State IA Zip Code 52563

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

Name of Employer (for Individual) Self-Employed Occupation (for Individual) Crop Insurance Agent

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **10 / 05 / 2016**

Transaction ID : C22049291

Amount of Each Receipt this Period **500.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Davis, Mike, , ,

Mailing Address 1746 SE Brookwood Ave

City Hillsboro State OR Zip Code 97123

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

Name of Employer (for Individual) Self-Employed Occupation (for Individual) Farrier

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt **10 / 13 / 2016**

Transaction ID : C22077097

Amount of Each Receipt this Period **25.00**

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Dicarlo, James, , ,

Mailing Address 150 Lombard St Apt # 601

City San Francisco State CA Zip Code 94111

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

Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 05 / 2016**

Transaction ID : C22049624

Amount of Each Receipt this Period **100.00**

Memo Item

SUBTOTAL of Receipts This Page (optional)..... **625.00**

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: (check only one)	PAGE 7 OF 43
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Emrich, Rachel, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 322 Cassell Ct
 City Wilmington State DE Zip Code 19803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) PNC Financial Services Inc Occupation (for Individual) Human Resources Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049902
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Fahnestock, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2204 W 1st St
 City Grand Island State NE Zip Code 68803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048590
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Falkner, Fred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5125 Cantabria Crst
 City Sarasota State FL Zip Code 34238-4469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048658
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	450.00
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: (check only one)	PAGE 8 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Falkner, Fred, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5125 Cantabria Crst
 City Sarasota State FL Zip Code 34238-4469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22049387
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Foszcz, Sara, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7301 W Burgett Rd
 City Richmond State IL Zip Code 60071-9787
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22048898
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Galbraith, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3930 N Harcourt Pl
 City Shorewood State WI Zip Code 53211-2444
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Musician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22049625
 Amount of Each Receipt this Period
 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	225.00
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: (check only one)	PAGE 9 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Garrett, Dallas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1570 Westbrook Ave
 City Odessa State TX Zip Code 79761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Westech Seal Occupation (for Individual) Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22048849
 Amount of Each Receipt this Period
 20.00
 Memo Item

B. Goodman, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 108 N Robeson St
 City Elizabethtown State NC Zip Code 28337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22048889
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Goodwin, Sally, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3677 Woodland Hall Ln
 City Clinton State WA Zip Code 98236
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22048871
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	220.00
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: (check only one)	PAGE 10 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Hallett, Jeffrey, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9341 Preston Trail E
 City Ponte Vedra Beach State FL Zip Code 32082
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22048458
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Haye, Henry, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6301 Turnberry Cir
 City Huntington Beach State CA Zip Code 92648
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 970.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22049409
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Holmes, Chad, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2473 S Monroe St
 City Denver State CO Zip Code 80210
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) VHAVSSC Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22049578
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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: (check only one)	PAGE 11 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Jacobson, Arthur, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4355 Valley Woods Dr
 City Independence State OH Zip Code 44131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049515
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Jacobson, Arthur, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4355 Valley Woods Dr
 City Independence State OH Zip Code 44131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049516
 Amount of Each Receipt this Period 200.00
 Memo Item

C. Jarowski, Joan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 161 Irving Place
 City Midland Park State NJ Zip Code 74302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2016
Transaction ID : C22077073
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	950.00
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: (check only one)	PAGE 12 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Jewell, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 749 Rhode Island St
 City San Francisco State CA Zip Code 94107
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 325.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048855
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Johnson, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8364 Yvonne Way
 City Fair Oaks State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 207.50

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049376
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Krawisz, Bruce, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1600 N Hills Dr
 City Marshfield State WI Zip Code 54449
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Marshfield Clinic Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 283.34

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048682
 Amount of Each Receipt this Period 200.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	350.00
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: (check only one)	PAGE 13 OF 43
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Lesser, Margo, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1044 N Glenhurst Dr
 City Birmingham State MI Zip Code 48009
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22049425
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Lichtenstein, Dorothy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 1369
 City Southampton State NY Zip Code 11969
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22049292
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Lindy, Cathy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 930 Cape Marco Dr Unit 506
 City Marco Island State FL Zip Code 34145-6344
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3050.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22048845
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	850.00
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: (check only one)	PAGE 14 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Lundquist, Vicki, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 133 Manningham Dr
 City Madison State AL Zip Code 35758
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Raytheon Occupation (for Individual) Engineer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 13 / 2016
Transaction ID : C22077088
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Lydell, Terrence, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1552 148th Ave NW
 City Andover State MN Zip Code 55304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049432
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Macaulay, Stewart, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 314 Shepard Terrace
 City Madison State WI Zip Code 53705
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Wisconsin Madison Occupation (for Individual) Professor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048656
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	400.00
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: (check only one)	PAGE 15 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. McClaskey, Veronica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6112 NW El Rey Dr
 City Camas State WA Zip Code 98607-9124
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048774
 Amount of Each Receipt this Period 75.00
 Memo Item

B. McGlothlin, Donald, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO Box 580
 City Lebanon State VA Zip Code 24266
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048987
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Passon, Gary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1390 S Kihei Rd
 City Kihei State HI Zip Code 96753
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2300.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048837
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	625.00
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: (check only one)	PAGE 16 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Poteete, Wallace, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6241 Grace Mountain St
 City Las Vegas State NV Zip Code 89115-6025
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 375.00

Date of Receipt 10 / 13 / 2016
Transaction ID : C22077093
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Pound, Patrick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1515 Dock St Unit 519
 City Tacoma State WA Zip Code 98402-3257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Department of Defense Occupation (for Individual) Program Integrator
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049417
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Price, Diane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 178 Oldfield Way
 City Okatie State SC Zip Code 29909
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048856
 Amount of Each Receipt this Period 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	600.00
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: (check only one)	PAGE 17 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Stewart, Frances, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4407 Maple Ave
 City Bethesda State MD Zip Code 20814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) US DoD Occupation (for Individual) Physician
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049596
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Tate, Allan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1025 Carpenter Rd
 City Bellbrook State OH Zip Code 45305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Landscaping Services
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048726
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Teel, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1009 Gilmore St
 City Fairbanks State AK Zip Code 99701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048631
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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: (check only one)	PAGE 18 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. Thomas, Frankie, , ,

Mailing Address 100 S Madison St

City Hugoton	State KS	Zip Code 67951
-----------------	-------------	-------------------

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

Name of Employer (for Individual) Self-Employed	Occupation (for Individual) Electrician
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : C22048681

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. Todd, Gregory, , ,

Mailing Address 312 W 91st St

City New York	State NY	Zip Code 10024
------------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : C22049164

Amount of Each Receipt this Period
500.00

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. Tompsett, Margaret, , ,

Mailing Address 17 Lake Shore Dr

City Chatham	State MA	Zip Code 02633
-----------------	-------------	-------------------

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

Name of Employer (for Individual) N/A	Occupation (for Individual) Not Employed
--	---

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2016

Transaction ID : C22049328

Amount of Each Receipt this Period
250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1250.00
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: (check only one)	PAGE 19 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Tsien, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 85200 Ridgetop Drive
 City Eugene State OR Zip Code 97405-9535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049550
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Turner, M Vincent, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12801 Old Columbia Pike, #129
 City Silver Spring State MD Zip Code 20904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Leisure World of Maryland Occupation (for Individual) Management
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048835
 Amount of Each Receipt this Period 75.00
 Memo Item

C. Vick, Edward, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15 E Point Ln
 City Old Greenwich State CT Zip Code 06870-2403
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049442
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	675.00
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: (check only one)	PAGE 20 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Wagner, Travis, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 142 Prairie Landing
 City Eagle Point State OR Zip Code 97524
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22049531
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Waite, Frederick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3624 Appleton St NW
 City Washington State DC Zip Code 20008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Vorys Sater Seymour and Pease LLP Occupation (for Individual) Attorney
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 13 / 2016
Transaction ID : C22077098
 Amount of Each Receipt this Period 100.00
 Memo Item

C. Watkins, Douglas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 Iris Way
 City Brunswick State ME Zip Code 04011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 05 / 2016
Transaction ID : C22048904
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	250.00
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: (check only one)	PAGE 21 OF 43
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
VOTEVETS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Webster, Jon, , ,		Date of Receipt
Mailing Address 2980 Salvio Street		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2016"/>
City Concord	State CA	Zip Code 94519
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C22048642
Name of Employer (for Individual) Self-Employed		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) Attorney		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Webster, Jon, , ,		Date of Receipt
Mailing Address 2980 Salvio Street		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2016"/>
City Concord	State CA	Zip Code 94519
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C22049546
Name of Employer (for Individual) Self-Employed		Amount of Each Receipt this Period <input type="text" value="100.00"/>
Occupation (for Individual) Attorney		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Willard, Eugene, , ,		Date of Receipt
Mailing Address 27 Woodale Rd		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2016"/>
City Philadelphia	State PA	Zip Code 19118-3429
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : C22048921
Name of Employer (for Individual) N/A		Amount of Each Receipt this Period <input type="text" value="10.00"/>
Occupation (for Individual) Not Employed		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="210.00"/>
TOTAL This Period (last page this line number only).....	<input type="text" value=""/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. Williams, Michael, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 124 Silk Tree Ln
 City Round Rock State TX Zip Code 78664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) University of Texas System Occupation (for Individual) Senior Systems Analyst
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22049366
 Amount of Each Receipt this Period
 210.00
 Memo Item

B. Workman, Chuck, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1508 Saint Andrews Way
 City Lansdale State PA Zip Code 19446
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) N/A Occupation (for Individual) Retired
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 335.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 05 / 2016
Transaction ID : C22049536
 Amount of Each Receipt this Period
 50.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	260.00
TOTAL This Period (last page this line number only).....▶	8790.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 23 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. AMERICAN HEALTH CARE ASSOCIATION POLITICAL ACTION COMMITTEE
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 75357
 City WASHINGTON State DC Zip Code 20013
 FEC ID number of contributing federal political committee. **C** C00006080
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 18 / 2016**
Transaction ID : C22083334
 Amount of Each Receipt this Period 5000.00
 Memo Item

B. COMMUNICATIONS WORKERS OF AMERICA-COPE POLITICAL C
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 501 Third Street, NW
 City Washington State DC Zip Code 20001
 FEC ID number of contributing federal political committee. **C** C00002089
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt **10 / 13 / 2016**
Transaction ID : C22083329
 Amount of Each Receipt this Period 5000.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	10000.00
TOTAL This Period (last page this line number only).....	10000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. FOR OUR FUTURE		Date of Receipt
Mailing Address 888 16TH ST., NW, STE. 650		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2016"/>
City WASHINGTON	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00620971"/>		Transaction ID : C22083337
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="187617.18"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="878444.80"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. FOR OUR FUTURE		Date of Receipt
Mailing Address 888 16TH ST., NW, STE. 650		<input type="text" value="10"/> / <input type="text" value="03"/> / <input type="text" value="2016"/>
City WASHINGTON	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00620971"/>		Transaction ID : C22083338
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="103449.60"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="878444.80"/>	Non-Contribution Account

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. FOR OUR FUTURE		Date of Receipt
Mailing Address 888 16TH ST., NW, STE. 650		<input type="text" value="10"/> / <input type="text" value="04"/> / <input type="text" value="2016"/>
City WASHINGTON	State DC	Zip Code 20006
FEC ID number of contributing federal political committee. <input type="text" value="C"/> <input type="text" value="C00620971"/>		Transaction ID : C22048440
Name of Employer (for Individual)		Amount of Each Receipt this Period <input type="text" value="103349.60"/>
Occupation (for Individual)		<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="878444.80"/>	Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="394416.38"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 25 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. FOR OUR FUTURE
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 888 16TH ST., NW, STE. 650

City WASHINGTON	State DC	Zip Code 20006
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00620971

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
878444.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2016

Transaction ID : C22048441

Amount of Each Receipt this Period
198488.21

Memo Item

Non-Contribution Account

B. MAJORITY FORWARD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 13TH STREET NW SUITE 600

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C90016098

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3059000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		06		2016

Transaction ID : C22048442

Amount of Each Receipt this Period
785000.00

Memo Item

Non-Contribution Account

C. MAJORITY FORWARD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 13TH STREET NW SUITE 600

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C90016098

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3059000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2016

Transaction ID : C22083336

Amount of Each Receipt this Period
1176000.00

Memo Item

Non-Contribution Account

SUBTOTAL of Receipts This Page (optional).....	12159488.21
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: (check only one)	PAGE 26 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
VOTEVETS

A. MAJORITY FORWARD
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 700 13TH STREET NW SUITE 600

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C90016098

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3059000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2016

Transaction ID : C22076974

Amount of Each Receipt this Period
1098000.00

Memo Item

Non-Contribution Account

B. Sussman, Donald, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 888 E Las Olas Blvd

City Fort Lauderdale	State FL	Zip Code 33301-2272
-------------------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)
Paloma Partners Advisros LP Investments Advisor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	03	/	2016

Transaction ID : C22048439

Amount of Each Receipt this Period
50000.00

Memo Item

Non-Contribution Account

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1148000.00
TOTAL This Period (last page this line number only).....	3701904.59

**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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 10 / 05 / 2016		
Mailing Address 14 Arrow St					
City Cambridge	State MA	Zip Code 02138-5106	FEC Identification Number C [] Transaction ID : D651776 Amount of Each Disbursement this Period [] 1458.23		
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	Category/Type []		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) B. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 10 / 13 / 2016		
Mailing Address 14 Arrow St					
City Cambridge	State MA	Zip Code 02138-5106	FEC Identification Number C [] Transaction ID : D654471 Amount of Each Disbursement this Period [] 130.58		
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	Category/Type []		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
Full Name (Last, First, Middle Initial) C. ActBlue Technical Services			Date of Disbursement MM / DD / YYYY 10 / 17 / 2016		
Mailing Address 14 Arrow St					
City Cambridge	State MA	Zip Code 02138-5106	FEC Identification Number C [] Transaction ID : D654472 Amount of Each Disbursement this Period [] 7.34		
Purpose of Disbursement Credit Card Processing Fees		Candidate Name	Category/Type []		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item		
State: District:					
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 1596.15		
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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial) A. ADP			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 07 / 2016		
Mailing Address 99 Jefferson Rd MS 220					
City Parsippany		State NJ	Zip Code 07054-2815		
Purpose of Disbursement Payroll Fees			Category/Type <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
Full Name (Last, First, Middle Initial) B. Bank of America			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 03 / 2016		
Mailing Address 56 E 42nd St					
City New York		State NY	Zip Code 10017-5407		
Purpose of Disbursement Bank Fees			Category/Type <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
Full Name (Last, First, Middle Initial) C. Bank of America			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Mailing Address 56 E 42nd St					
City New York		State NY	Zip Code 10017-5407		
Purpose of Disbursement Bank Fees			Category/Type <input type="checkbox"/>		
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:					
SUBTOTAL of Disbursements This Page (optional)..... ▶			273.53		
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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial) A. Eric Schmeltzer			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 75 Sutton St # 1			FEC Identification Number C [] Transaction ID : D654374 Amount of Each Disbursement this Period [] 200.00	
City Brooklyn	State NY	Zip Code 11222-4403	Category/Type []	
Purpose of Disbursement Communication Services			Amount of Each Disbursement this Period [] 200.00	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) B. Evans & Katz LLC			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 03 / 2016	
Mailing Address PO Box 75357			FEC Identification Number C [] Transaction ID : D654367 Amount of Each Disbursement this Period [] 1382.70	
City Washington	State DC	Zip Code 20013-0357	Category/Type []	
Purpose of Disbursement Compliance Services			Amount of Each Disbursement this Period [] 1382.70	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
Full Name (Last, First, Middle Initial) C. MacDonald, Les, , ,			Date of Disbursement M M / D D / Y Y Y Y Y Y 10 / 14 / 2016	
Mailing Address 1111 Locust St			FEC Identification Number C [] Transaction ID : D654372 Amount of Each Disbursement this Period [] 342.50	
City Philadelphia	State PA	Zip Code 19107-5869	Category/Type []	
Purpose of Disbursement Strategic Management Services			Amount of Each Disbursement this Period [] 342.50	
Candidate Name			Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
State: District:				
SUBTOTAL of Disbursements This Page (optional)..... ▶			[] 1925.20	
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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. Mellman, Peter, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 4518 N Kerby Ave

City Portland State OR Zip Code 97217-3042

Purpose of Disbursement Operation Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 14 / 2016

FEC Identification Number C

Transaction ID : D654373

Amount of Each Disbursement this Period 200.00

Memo Item

B. Revolution Messaging LLC

Full Name (Last, First, Middle Initial)

Mailing Address 1730 Rhode Island Ave NW Ste 310

City Washington State DC Zip Code 20036

Purpose of Disbursement Media Buy- Contains No Express Advocacy

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 05 / 2016

FEC Identification Number C

Transaction ID : D651461

Amount of Each Disbursement this Period 4319.50

Memo Item

C. Soltz, Jonathan, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 2727 South Quincy Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement Strategic Management Services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 14 / 2016

FEC Identification Number C

Transaction ID : D654375

Amount of Each Disbursement this Period 235.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4754.50

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial)
A. Tagaris, Tim, , ,

Mailing Address 1735 P St NW

City Washington State DC Zip Code 20036-1343

Purpose of Disbursement Digital Consulting Services

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 14 / 2016

FEC Identification Number: C

Transaction ID : D654376

Amount of Each Disbursement this Period: 4605.48

Memo Item

Full Name (Last, First, Middle Initial)
B. Hegdahl, Rick, , ,

Mailing Address 104 165th Ave NE

City Bellevue State WA Zip Code 98008-4516

Purpose of Disbursement Reimbs- Travel

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : D654847

Amount of Each Disbursement this Period: 863.21

Memo Item

Full Name (Last, First, Middle Initial)
C. Alaska Airlines

Mailing Address PO Box 68900

City Seattle State WA Zip Code 98168-0900

Purpose of Disbursement Travel

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 19 / 2016

FEC Identification Number: C

Transaction ID : D654848

Amount of Each Disbursement this Period: 545.20

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5468.69

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial) A. Hegdahl, Rick, , ,		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016	
Mailing Address 104 165th Ave NE		FEC Identification Number C [] Transaction ID : D654851 Amount of Each Disbursement this Period [] 968.01	
City Bellevue	State WA	Zip Code 98008-4516	Category/ Type []
Purpose of Disbursement Reimbs- Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) B. Southwest Airlines		Date of Disbursement MM / DD / YYYY 10 / 19 / 2016	
Mailing Address PO Box 36647-1CR		FEC Identification Number C [] Transaction ID : D654853 Amount of Each Disbursement this Period [] 785.96	
City Dallas	State TX	Zip Code 75235	Category/ Type []
Purpose of Disbursement Travel		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input checked="" type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY [] / [] / []	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Memo Item <input type="checkbox"/>
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 968.01
TOTAL This Period (last page this line number only).....▶	[] 14986.08

**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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input checked="" 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

Full Name (Last, First, Middle Initial) A. Quindel, Roger, , ,		Date of Disbursement MM / DD / YYYY 10 / 05 / 2016	
Mailing Address 2207 E Ivanhoe Pl		FEC Identification Number C [] Transaction ID : D651777 Amount of Each Disbursement this Period [] 1000.00 Non-Contribution Account <input type="checkbox"/> Memo Item	
City Milwaukee	State WI	Zip Code 53202	Category/ Type []
Purpose of Disbursement Refund		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Werner, Ken, , ,		Date of Disbursement MM / DD / YYYY 10 / 17 / 2016	
Mailing Address 15955 Woodvale Rd		FEC Identification Number C [] Transaction ID : D654473 Amount of Each Disbursement this Period [] 1350.00 Memo Item <input type="checkbox"/>	
City Los Angeles	State CA	Zip Code 91436	Category/ Type []
Purpose of Disbursement Refund		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period [] Memo Item <input type="checkbox"/>	
City	State	Zip Code	Category/ Type []
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2350.00
TOTAL This Period (last page this line number only).....▶	[] 2350.00

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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

Full Name (Last, First, Middle Initial)

A. FOR OUR FUTURE

Mailing Address 888 16TH ST., NW, STE. 650

City
WASHINGTON

State
DC

Zip Code
20006

Purpose of Disbursement
Refund

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
10			17			2016					

FEC Identification Number

C C00620971

Transaction ID : D654506

Amount of Each Disbursement this Period

103449.60

Non-Contribution Account

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

103449.60

TOTAL This Period (last page this line number only)..... ▶

103449.60

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 35 OF 43
	FOR LINE NUMBER: (check only one)
	<input type="checkbox"/> 9
	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
VOTEVETS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SKD Knickerbocker LLC			Nature of Debt (Purpose): Estimated Cost for Advertising Production
Mailing Address 1150 18th St NW Ste 800			
City Washington	State DC	Zip Code 20036-3845	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : D654935	
Amount Incurred This Period <input type="text" value="24682.10"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="24682.10"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Waterfront Strategies			Nature of Debt (Purpose): Estimated Cost for Advertising Production
Mailing Address 3050 K St NW			
City Washington	State DC	Zip Code 20007-5108	

Outstanding Balance Beginning This Period <input type="text" value="0.00"/>	Transaction ID : D654933	
Amount Incurred This Period <input type="text" value="12448.73"/>	Payment This Period <input type="text" value="0.00"/>	Outstanding Balance at Close of This Period <input type="text" value="12448.73"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period <input type="text"/>		
Amount Incurred This Period <input type="text"/>	Payment This Period <input type="text"/>	Outstanding Balance at Close of This Period <input type="text"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="37130.83"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="37130.83"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="0.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="37130.83"/>

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) VOTEVETS	FEC IDENTIFICATION NUMBER ▼ C C00418897
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies Non-Contribution Account	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3050 K St NW	Amount <input type="text"/>
City Washington State DC Zip Code 20007-5108	Transaction ID : D651167 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Media Buy Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose HECK, JOE, , , Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NV
Name of Federal Candidate: HECK, JOE, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1094211.00	

Full Name of Payee <input type="checkbox"/> Memo Item Grassroots Campaigns Inc. Non-Contribution Account	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address PO Box 120557	Amount <input type="text"/>
City Boston State MA Zip Code 02112-0557	Transaction ID : D651169 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Purpose of Expenditure Canvassing Services Category/Type 001	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CLINTON, HILLARY RODHAM, , , Office Sought: <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate District: 00 State: _____
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 262610.00	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 857009.10
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hegdahl, Rick, , ,

[Electronically Filed]

Date

/ /

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) VOTEVETS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00418897 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Grassroots Campaigns Inc. Non-Contribution Account		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016
Mailing Address PO Box 120557		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">51951.90</div>
City Boston	State MA	
Zip Code 02112-0557	Purpose of Expenditure Canvassing Services	Category/Type 001
Name of Federal Candidate: CLINTON, HILLARY RODHAM, , ,		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 262610.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item Grassroots Campaigns Inc. Non-Contribution Account		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 03 / 2016
Mailing Address PO Box 120557		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">51951.90</div>
City Boston	State MA	
Zip Code 02112-0557	Purpose of Expenditure Canvassing Services	Category/Type 001
Name of Federal Candidate: STRICKLAND, TED, , ,		Office Sought: <input type="checkbox"/> House District: <u>00</u> <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>OH</u>
Calendar Year-To-Date Per Election for Office Sought 90942.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">103903.80</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Hegdahl, Rick, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 10 / 27 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
VOTEVETS
FEC IDENTIFICATION NUMBER
C C00418897

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee: Grassroots Campaigns Inc.
Mailing Address: PO Box 120557
City: Boston, State: MA, Zip Code: 02112-0557
Purpose of Expenditure: Canvassing Services
Category/Type: 001
Name of Federal Candidate: MCGINTY, KATHLEEN ALANA, ,
Support: [X]
Office Sought: Senate
Disbursement For: General
Amount: 51274.00
Transaction ID: D651458

Full Name of Payee: Grassroots Campaigns Inc.
Mailing Address: PO Box 120557
City: Boston, State: MA, Zip Code: 02112-0557
Purpose of Expenditure: Canvassing Services
Category/Type: 001
Name of Federal Candidate: MURPHY, PATRICK E, ,
Support: [X]
Office Sought: Senate
Disbursement For: General
Amount: 46774.00
Transaction ID: D651459

(a) SUBTOTAL of Itemized Independent Expenditures: 98048.10
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hegdahl, Rick, ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) VOTEVETS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00418897 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on MM / DD / YYYY

Full Name of Payee <input type="checkbox"/> Memo Item SWAY Non-Contribution Account	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016						
Mailing Address 4350 E West Hwy Ste 350	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">20417.82</div> Transaction ID : D651443 Date of Disbursement or Obligation MM / DD / YYYY 10 / 05 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Bethesda</td> <td>MD</td> <td>20814-4579</td> </tr> </table>		City	State	Zip Code	Bethesda	MD	20814-4579
City		State	Zip Code				
Bethesda	MD	20814-4579					
Purpose of Expenditure Advertising Production Costs							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose POLIQUIN, BRUCE L, ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: ME						
Calendar Year-To-Date Per Election for Office Sought 520417.82	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Dixon / Davis Media Group, LLC Non-Contribution Account	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 04 / 2016						
Mailing Address 1028 33rd St NW Ste 300	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">25290.00</div> Transaction ID : D651453 Date of Disbursement or Obligation MM / DD / YYYY 10 / 06 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20007-3571</td> </tr> </table>		City	State	Zip Code	Washington	DC	20007-3571
City		State	Zip Code				
Washington	DC	20007-3571					
Purpose of Expenditure Advertising Production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose HECK, JOE, ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NV						
Calendar Year-To-Date Per Election for Office Sought 1094211.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">45707.82</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hegdahl, Rick, ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) VOTEVETS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00418897 </div>
--	--

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies Non-Contribution Account	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
Mailing Address 3050 K St NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1175666.00</div> Transaction ID : D651694 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 07 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20007-5108</td> </tr> </table>		City	State	Zip Code	Washington	DC	20007-5108
City		State	Zip Code				
Washington	DC	20007-5108					
Purpose of Expenditure Media Buy							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose AYOTTE, KELLY A, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NH <input type="checkbox"/> President						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1175666.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies Non-Contribution Account	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 12 / 2016						
Mailing Address 3050 K St NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">309960.00</div> Transaction ID : D652670 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20007-5108</td> </tr> </table>		City	State	Zip Code	Washington	DC	20007-5108
City		State	Zip Code				
Washington	DC	20007-5108					
Purpose of Expenditure Media Buy							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose HECK, JOE, , ,	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate District: 00 State: NV <input type="checkbox"/> President						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1094211.00</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">1485626.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hegdahl, Rick, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) VOTEVETS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00418897 </div>
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Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies Non-Contribution Account	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 13 / 2016						
Mailing Address 3050 K St NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">630547.20</div> Transaction ID : D652692 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20007-5108</td> </tr> </table>		City	State	Zip Code	Washington	DC	20007-5108
City		State	Zip Code				
Washington	DC	20007-5108					
Purpose of Expenditure Media Buy							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BLUNT, ROY, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1552935.32</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Waterfront Strategies Non-Contribution Account	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 13 / 2016						
Mailing Address 3050 K St NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">157636.80</div> Transaction ID : D653025 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 11 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20007-5108</td> </tr> </table>		City	State	Zip Code	Washington	DC	20007-5108
City		State	Zip Code				
Washington	DC	20007-5108					
Purpose of Expenditure Media Buy							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose KANDER, JASON, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">1552935.32</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">788184.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Hegdahl, Rick, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) VOTEVETS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00418897 </div>
--	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item SKD Knickerbocker LLC Non-Contribution Account	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 11 / 2016
Mailing Address 1150 18th St NW Ste 800	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 24682.10 </div> Transaction ID : D652691 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 13 / 2016
City Washington State DC Zip Code 20036-3845	
Purpose of Expenditure Estimated Cost for Advertising Production Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose AYOTTE, KELLY A, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 1175666.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Waterfront Strategies Non-Contribution Account	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 13 / 2016
Mailing Address 3050 K St NW	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 9958.98 </div> Transaction ID : D653034 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 13 / 2016
City Washington State DC Zip Code 20007-5108	
Purpose of Expenditure Estimated Cost for Advertising Production Category/Type 004	
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose BLUNT, ROY, , ,	Office Sought: <input type="checkbox"/> House District: 00 <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: MO
Calendar Year-To-Date Per Election for Office Sought 1552935.32	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> 0.00 </div>

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Hegdahl, Rick, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
10 / 27 / 2016

Signature

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) VOTEVETS	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00418897 </div>
--	---

Check if 24-hour report 48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input checked="" type="checkbox"/> Memo Item Waterfront Strategies Non-Contribution Account	Date of Public Distribution/Dissemination 10 / 13 / 2016						
Mailing Address 3050 K St NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2489.75</div> Transaction ID : D653035 Date of Disbursement or Obligation 10 / 13 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20007-5108</td> </tr> </table>		City	State	Zip Code	Washington	DC	20007-5108
City		State	Zip Code				
Washington	DC	20007-5108					
Purpose of Expenditure Estimated Cost for Advertising Production							
Name of Federal Candidate: KANDER, JASON, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify)						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶						
<div style="border: 1px solid black; padding: 2px; text-align: right;">1552935.32</div>							

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y						
Mailing Address	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> </div> Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:40%;">City</td> <td style="width:20%;">State</td> <td style="width:40%;">Zip Code</td> </tr> <tr> <td> </td> <td> </td> <td> </td> </tr> </table>		City	State	Zip Code			
City		State	Zip Code				
Purpose of Expenditure							
Name of Federal Candidate:	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/> Other (specify)						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶						
<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>							

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">3378478.82</div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Hegdahl, Rick, , ,

[Electronically Filed]

Date

10 / 27 / 2016

Signature