

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

1. (a) Name of Individual, Organization or Corporation <b>VoteVets.org Action Fund</b>			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 2201 Wisconsin Ave NW #320			
(c) City, State and ZIP Code Washington DC 20007			3. FEC Identification Number <div style="border: 1px solid black; padding: 5px; display: inline-block;">           C C90010620         </div>
2. Occupation and Name of Employer (for Individual Filers Only)			

MM / DD / YYYY

7. TOTAL INDEPENDENT EXPENDITURES .....	95200.00
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06/06/2022

FEC Schedule 5 (REV. 09/2013)

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 2 OF 2  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

VoteVets.org Action Fund

Full Name (Last, First, Middle Initial) of Payee  
Targeted Platform Media, LLC

Date of Public Distribution/Dissemination

MM / DD / YYYY  
06 / 06 / 2022

Mailing Address 1291 Hollywood Ave

Amount

City State Zip Code  
Annapolis MD 21403-4909

95200.00

Transaction ID : 500008165

Purpose of Expenditure  
TV Advertising BuyCategory/  
Type 004Office Sought: ☒ House State: IL  
☐ Senate District: 03  
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
VILLEGAS, GILBERT, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought 523170.00Disbursement For: ☒ Primary ☐ General  
2022 ☐ Other (specify) ▶

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

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▶

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

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office SoughtDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 95200.00

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

(c) TOTAL Independent Expenditures.....▶ 95200.00  
(carry total from last page forward to Line 7)