

FEC FORM 5**REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED****To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation VoteVets Action Fund		3. FEC Identification Number C C90010620
(b) Address (number and street) ☐ check if different than previously reported 303 Park Ave. S.		
(c) City, State and ZIP Code New York NY 10010		
2.	Corporate filers only Is the filer a qualified nonprofit corporation? ☐ Yes ☐ No	
Individual filers only Name of Employer Occupation		

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☒ 24-Hour Notice ☐ 48-Hour Notice
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☐ No ☒

5. COVERING PERIOD: FROM

M M
09

D D
20

Y Y Y Y
2010

THROUGH

M M
10

D D
02

Y Y Y Y
2010

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

48065.00

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM**SIGNATURE****DATE**

Peter Mellman

09/21/2010

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

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

VoteVets Action Fund

Full Name (Last, First, Middle Initial) of Payee
Precision Strategies, LLC

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0Mailing Address
1015 Queen St.

Amount

14605.00

City

Alexandria

State

VA

Zip Code

22314

Purpose of Expenditure

Design and printing of doorhangers (Veterans)

Category/
Type

Office Sought:

☐ House

State: PA

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Joseph SestakCalendar Year-To-Date Per Election
for Office Sought

.00

Disbursement For:
2010☐ Primary☒ General☐ Other (specify) _____Full Name (Last, First, Middle Initial) of Payee
Grassroots Campaigns, Inc.

Date

M M / D D / Y Y Y Y
0 9 / 2 0 / 2 0 1 0Mailing Address
PO Box 120557

Amount

33460.00

City

Boston

State

MA

Zip Code

02112

Purpose of Expenditure

Voter ID and persuasion canvass operation

Category/
Type

Office Sought:

☐ House

State: PA

Senate

☒ Senate

District: _____

☐ President

Check One:

☒ Support☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Joseph SestakCalendar Year-To-Date Per Election
for Office Sought

.00

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

(a) SUBTOTAL of Itemized Independent Expenditures

48065.00

(b) SUBTOTAL of Unitemized Independent Expenditures

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

48065.00