Image# 10931729419 10 17:43

## **FEC FORM 5**

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(a) Name of Individual, Organization or Corporation	¬				
VOTEVETS.ORG ACTION FUND					
(b) Address (number and street)					
303 PARK AVE S #1293					
(c) City, State and ZIP Code					
NEW YORK NY 10010	FEC Identification Number				
2. Corporate filers only	<b>C</b> C90010620				
Is the filer a qualified nonprofit corporation?					
Individual filers only Name of Employer	Occupation				
4. TYPE OF REPORT (check appropriate boxes):					
(a) April 15 Quarterly Report	ur Notice				
July 15 Quarterly Report					
October Quarterly Report					
☐ January 31 Year-End Report					
(b) Is this Report an amendment? Yes No X					
5. COVERING PERIOD: FROM 10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
THROUGH					
$\begin{bmatrix} \mathbf{M} & \mathbf{M} \\ 1 & 1 \end{bmatrix} / \begin{bmatrix} \mathbf{D} & \mathbf{D} \\ 0 & 1 \end{bmatrix} / \begin{bmatrix} \mathbf{Y} & \mathbf{Y} & \mathbf{Y} & \mathbf{Y} \\ 2 & 0 & 1 & 0 \end{bmatrix}$					
6. TOTAL CONTRIBUTIONS	.00				
7. TOTAL INDEPENDENT EXPENDITURES	100000.00				
7. ISTALINGE ENDERN EXCENSIONED					
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition	or in constitution with, or at the				
request of suggestion of, a candidate of a candidate's agent of authorized committee of a political party committee of its agent. In additional reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regula					
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE				
Peter Mellman	10/21/2010				
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this rep	ort 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

## Image# 10931729420 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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AME OF FILER (In Full) VOTEVETS.ORG ACTION FUND				
Full Name (Last, First, Middle Initial) of Payee Buying Time, LLC				Date    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 650 Massachusetts Ave NW				Amount
City Washington	State DC	Zip Code 20001		100000.00
Purpose of Expenditure Broadcast and cable TV buy (Highway)		Category/ Type		Office Sought: House State: NV Senate X Senate
Name of Federal Candidate Supported or Opposed by Harry Reid	Expenditure	:		Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought			.00	Disbursement For: Primary X General 2010 Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·			100000.00
(b) SUBTOTALof Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures				100000 00