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Image# 10991232622 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						
Vot	eVets Action Fund					
(b)	Address (number and					
	Park Ave. S.					
(c)	City, State and ZIP Co	ode				
New York NY 10010		3. FEC Identification Number				
2. Corporate filers only				C C90010620		
		Is the filer a qualified nonprofit co	rporation? 🗌 Yes 🗌 No			
Inc	lividual filers only	Name of Employer		Occupation		
4. TYPE OF REPORT (check appropriate boxes):						
	(a) April 15 Quarterly Report 24-Hour Notice 48-Hour			ur Notice		
	🗌 July 15					
	Januar					
	(b) Is this Rep					
	5. COVERING P	ERIOD: FROM 1.0				
		THR	OUGH			
		M M / D 1				
	6. TOTAL CONT	RIBUTIONS	L	.00		
		PENDENT EXPENDITURES		38295.00		
Under p	enalty of perjury, I certify tha	t the independent expenditures reported herein	were not made with the cooperation or prior consent of,	or in constitution with, or at the		
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	10/01/2010				
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

Image# 10991232623 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF FILER (In Full)

VoteVets Action Fund

FOR LINE 7 FOR FORM 5

Full Name (Last, First, Middle Initial) of Payee	Date	
Grassroots Campaigns, Inc.	M M / D D / Y Y Y Y 0 9 30 2010	
Mailing Address PO Box 120557	Amount	
	38295.00	
CityStateZip CodeBostonMA02112		
Purpose of Expenditure Category/	Office Sought: House State: PA	
Voter ID and persuasion canvass operation Type	Senate X Senate	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
Joseph Sestak	Check One: X Support Oppose	
Calendar Year-To-Date Per Election for Office Sought .00	Disbursement For: 2010 Other (specify)	
	38295.00	
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTALof Unitemized Independent Expenditures		
·····		
(c) TOTAL Independent Expenditures	38295.00	
(vary total normast page tormald to Line 1)		