



A. Form/Schedule : **F3XA**

Transaction ID :

The expenditures listed as Strategic Management Services on Schedule B were not made on behalf of any federal candidates and were properly disclosed on the corresponding disbursement schedule of the report. The expenditures disclosed on Schedule B for Communications Services are not public communication or voter drive activity containing express advocacy. These expenditures were made exclusively to support the activities of VoteVets.

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
VOTEVETS

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	8

D	D
1	2

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		123248.55
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	70868.48									
(c) Total Receipts (from Line 19) .....	4132.90	32175.09								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	75001.38	155423.64								
7. Total Disbursements (from Line 31) .....	10967.25	91389.51								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	64034.13	64034.13								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
VOTEVETS

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	8

D	D
1	2

Y	Y	Y	Y
2	0	0	9

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) .....	2000.00	10889.01
(ii) Unitemized .....	2112.00	16265.18
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	4112.00	27154.19
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	4112.00	32154.19
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) .....	20.90	20.90
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
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 Transfer (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)) .....	4132.90	32175.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	4132.90	32175.09

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	6812.25	48234.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	6812.25	48234.51
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3000.00	42000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(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 .....	1155.00	1155.00
(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)) .....	1155.00	1155.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	10967.25	91389.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10967.25	91389.51

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	4112.00	32154.19
34. Total Contribution Refunds (from Line 28(d)) .....	1155.00	1155.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2957.00	30999.19
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	6812.25	48234.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	20.90	20.90
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6791.35	48213.61

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

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

FOR LINE NUMBER: PAGE 7 / 19  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
VOTEVETS

**A.** Full Name (Last, First, Middle Initial)  
John Mabry  
Mailing Address 915 S. Mooney Blvd.  
City Visalia State CA Zip Code 93277  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00  
Date of Receipt 07 / 14 / 2009  
Transaction ID: C18261694  
Amount of Each Receipt this Period 1000.00

**B.** Full Name (Last, First, Middle Initial)  
Patrick Pound  
Mailing Address 3009 44th St E  
City Tacoma State WA Zip Code 98443-1611  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 750.00  
Date of Receipt 07 / 07 / 2009  
Transaction ID: C18109194  
Amount of Each Receipt this Period 500.00

**C.** Full Name (Last, First, Middle Initial)  
Harry Kamen  
Mailing Address 910 Park Avenue  
City New York State NY Zip Code 10075  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Information Requested Occupation Information Requested  
Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 08 / 02 / 2009  
Transaction ID: C18109078A  
Amount of Each Receipt this Period 500.00  
\* Earmarked Contribution: See Below

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2000.00  
**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:	PAGE 8 / 19
	(check only one)	
<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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full) VOTEVETS
---

A.

Full Name (Last, First, Middle Initial) ACTBLUE		Date of Receipt M M / D D / Y Y Y Y 0 8 / 0 2 / 2 0 0 9
Mailing Address PO Box 382110		Transaction ID: C18109078AB
City Cambridge	State MA	Zip Code 02238-2110
FEC ID number of contributing federal political committee. C C00401224		Amount of Each Receipt this Period 500.00
Name of Employer	Occupation Conduit total listed in Agg. field	[MEMO ITEM] Note: Above Contribution earmarked through this organization.
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1384.00	

SUBTOTAL of Receipts This Page (optional) .....	0.00
TOTAL This Period (last page this line number only) .....	2000.00



**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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D379668 Date of Disbursement 07 / 08 / 2009
	Mailing Address 99 Jefferson Rd, Mail Stop 220	Amount of Each Disbursement this Period 62.97
	City Parsippany State NJ Zip Code 07054	
	Purpose of Disbursement Payroll Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D379669 Date of Disbursement 07 / 14 / 2009
	Mailing Address 99 Jefferson Rd, Mail Stop 220	Amount of Each Disbursement this Period 185.47
	City Parsippany State NJ Zip Code 07054	
	Purpose of Disbursement Payroll Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D379670 Date of Disbursement 07 / 22 / 2009
	Mailing Address 99 Jefferson Rd, Mail Stop 220	Amount of Each Disbursement this Period 60.97
	City Parsippany State NJ Zip Code 07054	
	Purpose of Disbursement Payroll Fees	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	309.41
<b>TOTAL</b> 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)

PAGE 10 / 19

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D379671 Date of Disbursement 07 / 30 / 2009
	Mailing Address 99 Jefferson Rd, Mail Stop 220	Amount of Each Disbursement this Period 185.47
	City Parsippany State NJ Zip Code 07054	
	Purpose of Disbursement Payroll Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ADP	Transaction ID: D379672 Date of Disbursement 08 / 05 / 2009
	Mailing Address 99 Jefferson Rd, Mail Stop 220	Amount of Each Disbursement this Period 60.97
	City Parsippany State NJ Zip Code 07054	
	Purpose of Disbursement Payroll Fees Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ampersand Consulting	Transaction ID: D379676 Date of Disbursement 07 / 23 / 2009
	Mailing Address 158 44th Street	Amount of Each Disbursement this Period 634.50
	City Pittsburgh State PA Zip Code 15201	
	Purpose of Disbursement Website Management Fee Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>880.94</b>
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<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

<b>A.</b> Full Name (Last, First, Middle Initial) AT&T Mobility <hr/> Mailing Address PO Box 6463 <hr/> City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Mobile Phone Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D379679 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9
	Amount of Each Disbursement this Period 47.06

<b>B.</b> Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address 56 E 42nd St <hr/> City New York State NY Zip Code 10017-5407 Purpose of Disbursement Credit Card Processing Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D379663 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 106.98

<b>C.</b> Full Name (Last, First, Middle Initial) Bank of America <hr/> Mailing Address 56 E 42nd St <hr/> City New York State NY Zip Code 10017-5407 Purpose of Disbursement Credit Card Processing Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: D379665 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 124.77

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	278.81
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# 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"/> 24	<input type="checkbox"/> 25	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Blackrock Associates, LLC <hr/> Mailing Address 1936 University Ave. Suite 191 <hr/> City Berkeley State CA Zip Code 94704 <hr/> Purpose of Disbursement Database Software & Support Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D379675 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 9	Amount of Each Disbursement this Period 175.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Eric Schmeltzer <hr/> Mailing Address 75 Sutton St # 1 <hr/> City Brooklyn State NY Zip Code 11222-4403 <hr/> Purpose of Disbursement Communications Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D379687 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 300.00
<b>C.</b>	Full Name (Last, First, Middle Initial) Eric Schmeltzer <hr/> Mailing Address 75 Sutton St # 1 <hr/> City Brooklyn State NY Zip Code 11222-4403 <hr/> Purpose of Disbursement Communications Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> D379688 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9	Amount of Each Disbursement this Period 300.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	775.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<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.

Full Name (Last, First, Middle Initial)  
Evans & Katz LLC

Transaction ID: D379681  
Date of Disbursement

Mailing Address 1831 Bay Street, SE

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	9

City Washington State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement  
Accounting Services

--

233.75
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Brandon Friedman

Transaction ID: D379693  
Date of Disbursement

Mailing Address 4975 Morris Ave.  
Apt 3343

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	4		2	0	0	9

City Addison State TX Zip Code 75001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Salary

--

225.00
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Brandon Friedman

Transaction ID: D379694  
Date of Disbursement

Mailing Address 4975 Morris Ave.  
Apt 3343

M	M	/	D	D	/	Y	Y	Y	Y
0	7		3	0		2	0	0	9

City Addison State TX Zip Code 75001

Amount of Each Disbursement this Period

Purpose of Disbursement  
Salary

--

225.00
--------

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

683.75
--------

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

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**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"/> 24	<input type="checkbox"/> 25	<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.	Full Name (Last, First, Middle Initial) Peter Granato	Transaction ID: D379691 Date of Disbursement 07 / 14 / 2009
	Mailing Address 1701 16th Street NW Apt. 704	Amount of Each Disbursement this Period 242.35
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Peter Granato	Transaction ID: D379692 Date of Disbursement 07 / 30 / 2009
	Mailing Address 1701 16th Street NW Apt. 704	Amount of Each Disbursement this Period 242.35
	City Washington State DC Zip Code 20009	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Les MacDonald	Transaction ID: D379685 Date of Disbursement 07 / 14 / 2009
	Mailing Address One Caryl Lane	Amount of Each Disbursement this Period 600.00
	City Philadelphia State PA Zip Code 19118	
	Purpose of Disbursement Strategic Management Services Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1084.70</b>
<b>TOTAL</b> 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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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.	Full Name (Last, First, Middle Initial) Les MacDonald	Transaction ID: D379686 Date of Disbursement 07 / 30 / 2009
	Mailing Address One Caryl Lane	Amount of Each Disbursement this Period 600.00
	City Philadelphia State PA Zip Code 19118	
	Purpose of Disbursement Strategic Management Services 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) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Brian McGough	Transaction ID: D379695 Date of Disbursement 07 / 14 / 2009
	Mailing Address 43190 Arbor Greene Way	Amount of Each Disbursement this Period 150.00
	City Ashburn State VA Zip Code 20148	
	Purpose of Disbursement Salary 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) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Brian McGough	Transaction ID: D379696 Date of Disbursement 07 / 30 / 2009
	Mailing Address 43190 Arbor Greene Way	Amount of Each Disbursement this Period 150.00
	City Ashburn State VA Zip Code 20148	
	Purpose of Disbursement Salary 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) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	900.00
<b>TOTAL</b> 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"/> 24	<input type="checkbox"/> 25	<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.	Full Name (Last, First, Middle Initial) Peter Mellman	Transaction ID: D379689 Date of Disbursement 07 / 14 / 2009
	Mailing Address 1425 NW 19th Ave #11 City Portland State OR Zip Code 97209 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 300.00

B.	Full Name (Last, First, Middle Initial) Peter Mellman	Transaction ID: D379690 Date of Disbursement 07 / 30 / 2009
	Mailing Address 1425 NW 19th Ave #11 City Portland State OR Zip Code 97209 Purpose of Disbursement Salary Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 300.00

C.	Full Name (Last, First, Middle Initial) Oxford Health Insurance Co.	Transaction ID: D379680 Date of Disbursement 07 / 30 / 2009
	Mailing Address 2721 N Central Ave City Phoenix State AZ Zip Code 85004-1121 Purpose of Disbursement Health Insurance Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 212.46

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>812.46</b>
<b>TOTAL</b> 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)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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.	Full Name (Last, First, Middle Initial) Jonathan Soltz	Transaction ID: D379683 Date of Disbursement 07 / 14 / 2009
	Mailing Address 5290 Duke Street	Amount of Each Disbursement this Period 467.35
	City Alexandria State VA Zip Code 22304	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jonathan Soltz	Transaction ID: D379684 Date of Disbursement 07 / 30 / 2009
	Mailing Address 5290 Duke Street	Amount of Each Disbursement this Period 467.35
	City Alexandria State VA Zip Code 22304	
	Purpose of Disbursement Salary Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	934.70
<b>TOTAL</b> This Period (last page this line number only) .....	6659.77

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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.** Full Name (Last, First, Middle Initial)  
ANTHONY WOODS FOR CONGRESS

Mailing Address P.O. Box 28

City State Zip Code  
Fairfield CA 94533

Purpose of Disbursement  
Contribution

Candidate Name  
Anthony Woods

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼  
Special

State: CA District: 10

Transaction ID: D379678

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
PATRICK MURPHY FOR CONGRESS

Mailing Address PO Box 868

City State Zip Code  
Levittown PA 19058-0868

Purpose of Disbursement  
Contribution

Candidate Name  
Patrick Murphy

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: PA District: 08

Transaction ID: D379682

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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

A.	Full Name (Last, First, Middle Initial) Michael Urbanski		Transaction ID: D394280	
	Mailing Address 65 Old Solomons Road		Date of Disbursement 07 / 20 / 2009	
	City Annapolis	State MD	Zip Code 21401	Amount of Each Disbursement this Period 1155.00
	Purpose of Disbursement Refund		Category/ Type	
	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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	1155.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1155.00