

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
American Crossroads

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	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>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		0.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	6227252.00									
(c) Total Receipts (from Line 19)	7932168.76	22769806.28								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14159420.76	22769806.28								
7. Total Disbursements (from Line 31)	6273187.45	14883572.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7886233.31	7886233.31								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
American Crossroads

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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)	7887476.00	22635962.52
(ii) Unitemized	44692.76	60093.76
(iii) TOTAL (add Lines 11(a)(i) and (ii)	7932168.76	22696056.28
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	7932168.76	22696056.28
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)	0.00	73750.00
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))	7932168.76	2269806.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	7932168.76	2269806.28

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	2573414.37	3823255.93
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2573414.37	3823255.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	3099773.08	9610317.04
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	0.00	0.00
(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))	0.00	0.00
29. Other Disbursements.....	600000.00	1450000.00
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))..	6273187.45	14883572.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6273187.45	14883572.97

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 105

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)	7932168.76	22696056.28
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7932168.76	22696056.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2573414.37	3823255.93
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	73750.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2573414.37	3749505.93

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 105
	(check only one)
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/>	<input type="checkbox"/> 15
<input type="checkbox"/>	<input type="checkbox"/> 16
<input type="checkbox"/>	<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) DANE AFMAN	Date of Receipt MM / DD / YYYY 10 / 09 / 2010
	Mailing Address 3335-F HAMPTON POINT DRIVE	Transaction ID: SA11.573
	City State Zip Code SILVER SPRING MD 20904-4881	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SAIC Occupation ANALYST Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date <input type="checkbox"/> 250.00	

B.	Full Name (Last, First, Middle Initial) JERRY ANCHES	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 1102 POST AVENUE	Transaction ID: SA11.964
	City State Zip Code SEATTLE WA 98101-2915	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF Occupation REAL ESTATE DEVELOPER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date <input type="checkbox"/> 500.00	

C.	Full Name (Last, First, Middle Initial) TODD ANDREWS	Date of Receipt MM / DD / YYYY 10 / 11 / 2010
	Mailing Address 26932 BOULDER CREST	Transaction ID: SA11.576
	City State Zip Code VALENCIA CA 91381-0626	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer PUBLIC STORAGE Occupation ACCOUNTANT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date <input type="checkbox"/> 250.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
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: <input 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	PAGE 7 / 105
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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) ROBERT ANGELICA	Date of Receipt MM / DD / YYYY 10 / 03 / 2010
	Mailing Address 39 COMMUNITY PLACE	Transaction ID: SA11.254
	City State Zip Code MORRISTOWN NJ 07960-5253	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation AT&T COMMUNICATIONS EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) GLENN AUSTIN	Date of Receipt MM / DD / YYYY 10 / 11 / 2010
	Mailing Address 5640 ERROL PLACE	Transaction ID: SA11.577
	City State Zip Code ATLANTA GA 30327-4862	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.	Full Name (Last, First, Middle Initial) CARLOS AYALA	Date of Receipt MM / DD / YYYY 10 / 10 / 2010
	Mailing Address 1529 WOODLAND RD.	Transaction ID: SA11.578
	City State Zip Code SALISBURY MD 21801-6738	Amount of Each Receipt this Period 25.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ERDUE FARMS, INC. VP INTERNATIONAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 227.02	

SUBTOTAL of Receipts This Page (optional)	775.00
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 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
STEVEN BAGBY

Mailing Address 1817 SELVA GRANDE DR

City ATLANTIC BEACH State FL Zip Code 32233-4526

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF EMPLOYED Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.968
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD BAILEY

Mailing Address 907 SHOAL CREEK PL

City WILMINGTON State NC Zip Code 28405-5211

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 11 / 2010
Transaction ID: SA11.579
Amount of Each Receipt this Period 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEWART BAKER

Mailing Address P.O. BOX 980338

City HOUSTON State TX Zip Code 77098-0338

FEC ID number of contributing federal political committee. **C**

Name of Employer BREMOND CO. Occupation PROPERTY MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.970
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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: (check only one)	PAGE 9 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) JUDY S. BARDUGO		Date of Receipt
	Mailing Address 200 SOUTH IRVING BLVD.		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LOS ANGELES	CA	90004-3810
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.582
		Amount of Each Receipt this Period	
		<input type="text" value="250.00"/>	
Name of Employer RETIRED		Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="250.00"/>	

B.	Full Name (Last, First, Middle Initial) JOHN BARINEAU		Date of Receipt
	Mailing Address 5509 BRIAR DRIVE		<input type="text" value="10"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOUSTON	TX	77056-1107
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.583
		Amount of Each Receipt this Period	
		<input type="text" value="250.00"/>	
Name of Employer RADNEY MANAGEMENT		Occupation DEVELOPER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="250.00"/>	

C.	Full Name (Last, First, Middle Initial) ZANDRA BEAN		Date of Receipt
	Mailing Address 8503 MASSEY RD		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PILOT POINT	TX	76258-6632
	FEC ID number of contributing federal political committee.		Transaction ID: SA11.1390
		Amount of Each Receipt this Period	
		<input type="text" value="500.00"/>	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="500.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 105
	<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	

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) DAVID BEECKEN	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 1530 N. STATE PARKWAY	Transaction ID: SA11.1392
	City State Zip Code CHICAGO IL 60610-8619	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer BEECKEN PETTY O'KEEFE & COMPANY	Occupation PRIVATE EQUITY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

B.	Full Name (Last, First, Middle Initial) MARGARET BELL	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 10911 CARISSA DRIVE	Transaction ID: SA11.1394
	City State Zip Code DALLAS TX 75218-1221	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF	Occupation REALTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) MIKE BINDER	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 11812 SANVICENTE	Transaction ID: SA11.987
	City State Zip Code LOS ANGELES CA 90049-5022	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF	Occupation WRITER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
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 11 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
GAIL BLAUSTEIN

Mailing Address 628 DERBY AVE.

City State Zip Code
WOODMERE NY 11598-2740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 11 / 2010

Transaction ID: SA11.587

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GUY BOIKE

Mailing Address 9967 WHITE PINE COURT

City State Zip Code
CLARKSTON MI 48348-1654

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 13 / 2010

Transaction ID: SA11.1409

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RUSSELL BOSWORTH

Mailing Address 1735 YORK AVENUE 19B

City State Zip Code
NEW YORK NY 10128-6859

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
BFS CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2010

Transaction ID: SA11.588

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1000.00

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 12 / 105
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) JOHN BRADLEY		Date of Receipt
	Mailing Address P.O. BOX 818		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOLBROOK	AZ	86025
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer BRADCO		Occupation PRESIDENT	Transaction ID: SA11.1415
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) WILLIAM BRINTON		Date of Receipt
	Mailing Address 19201 HIGHWAY 12, STE 402		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SONOMA	CA	95476-5413
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer CHARLES CREEK		Occupation WINEMAKER	Transaction ID: SA11.1004
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) EILEEN B BROOKS		Date of Receipt
	Mailing Address 6365 SW 110TH STREET		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PINECREST	FL	33156-4065
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PHOENIX AMERICAN		Occupation ACCOUNTS PAYABLE MANAGER	Transaction ID: SA11.1425
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="2250.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 105
(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
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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
GREG BROWN

Mailing Address 11921 GRANDVIEW

City State Zip Code
COLUMBUS IN 47201-8957

FEC ID number of contributing federal political committee. **C**

Name of Employer HOOSIER PATHOLOGY Occupation PATHOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1427

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
W. L. LYONS BROWN, JR.

Mailing Address 320 WHITTINGTON PARKWAY

City State Zip Code
LOUISVILLE KY 40222-4928

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11.867

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
WAYNE BROWN

Mailing Address 209 HUDSON TRACE

City State Zip Code
AUGUSTA GA 30907-2010

FEC ID number of contributing federal political committee. **C**

Name of Employer WAYNEWORKS Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.595

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **21000.00**

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 14 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JOSEPH BUNGE

Mailing Address 6980 GIVEN ROAD

City CINCINNATI State OH Zip Code 45243-2840

FEC ID number of contributing federal political committee. **C**

Name of Employer WRM Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 11 / 2010
Transaction ID: SA11.596
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES CAHALAN

Mailing Address 1913 MISTLETOE LANE

City EDMOND State OK Zip Code 73034-6074

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 10 / 11 / 2010
Transaction ID: SA11.598
Amount of Each Receipt this Period 300.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARGARET CHILD SMITH

Mailing Address 3147 BONNELL AVE

City GRAND RAPIDS State MI Zip Code 49506-3135

FEC ID number of contributing federal political committee. **C**

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.1455
Amount of Each Receipt this Period 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 800.00

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: (check only one)	PAGE 15 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) HAROLD CROCKER		Date of Receipt	
	Mailing Address 18411 MARLIN WATERS		M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.612
	HUMBLE	TX	77346-8005	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

B.	Full Name (Last, First, Middle Initial) RALPH CROTTY		Date of Receipt	
	Mailing Address 19415 EGRET HAVEN LANE		M M / D D / Y Y Y Y Y 1 0 / 0 2 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.258
	CYPRESS	TX	77433-6260	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer SAVASENIORCARE		Occupation C.O.T.A.		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

C.	Full Name (Last, First, Middle Initial) MARY ANN CURNAN		Date of Receipt	
	Mailing Address 3150 NORTH HIGHWAY A1A APARTMENT 201N		M M / D D / Y Y Y Y Y 1 0 / 0 9 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: SA11.613
	FORT PIERCE	FL	34949-8723	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		250.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS		CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	▶	750.00
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 16 / 105
(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
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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial) BERNARD CURRY		Date of Receipt MM / DD / YYYY 10 / 13 / 2010
Mailing Address 727 CENTRAL AVENUE		Transaction ID: SA11.1039
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.

Full Name (Last, First, Middle Initial) JOSEPH DEMAIO		Date of Receipt MM / DD / YYYY 10 / 13 / 2010
Mailing Address 590 WESTFIELD AVE.		Transaction ID: SA11.1492
City WESTFIELD	State NJ	Zip Code 07090-3312
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer SELF	Occupation ORAL SURGEON	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) JAMES DEMIS		Date of Receipt MM / DD / YYYY 10 / 12 / 2010
Mailing Address 45 SCENIC RIDGE ROAD		Transaction ID: SA11.1890
City NEW PALTZ	State NY	Zip Code 12561-4118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer WESCO DISTRIBUTION	Occupation SALESMAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	2500.00
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: (check only one)	PAGE 17 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) KENNETH DENNISON		Date of Receipt
	Mailing Address 821 WILLIAM THOMAS DR		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	KENNETT SQUARE	PA	19348-1352
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.1054
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text" value="250.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) RICHARD DENTON		Date of Receipt
	Mailing Address 532 CONCERTO DRIVE		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	COLORADO SPRINGS	CO	80906-5966
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.1493
Name of Employer SELF		Occupation ENTREPRENEUR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	<input type="text" value="250.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) UTA DETAPPAN-STALEY		Date of Receipt
	Mailing Address 9450 W. BRYN MAWR SUITE 310		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	ROSEMONT	IL	60018-5272
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.618
Name of Employer SELF		Occupation INVESTOR	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	<input type="text" value="500.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 18 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
PHILIP DINENNO

Mailing Address 2590 DURNESS DR

City State Zip Code
FINKSBURG MD 21048-1929

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HUGHES ASSOCIATES INC. ENGINEER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1497

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DENNIS DODD

Mailing Address P.O. BOX 698

City State Zip Code
CORTEZ FL 34215-0698

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1499

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN DOWD

Mailing Address 1529 CROWELL ROAD

City State Zip Code
VIENNA VA 22182-1514

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
AKIN,GUMP,STRAUSS,HAUER&F-ELD,LLP ATTORNEY

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 1 0

Transaction ID: SA11.260

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

7000.00

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 19 / 105
(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
DAVID DOWLER

Mailing Address 3509 CRESCENT AVENUE

City State Zip Code
DALLAS TX 75205-3924

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
LKCM INC PORTFOLIO MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.625

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CARTER DUNLAP

Mailing Address 433 JEROME AVE

City State Zip Code
PIEDMONT CA 94610-1025

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
DEM, LLC ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1064

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DANIEL DUNN

Mailing Address 2402 GARZA STREET

City State Zip Code
EDINBURG TX 78539-6641

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED BUSINESS OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1509

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 20 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
STEPHEN EICHENBERGER

Mailing Address 25 CENTRAL PARK WEST
APT 21J

City State Zip Code
NEW YORK NY 10023-7231

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JP MORGAN CHASE BANKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1512

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WILLIAM EILAND

Mailing Address 2004 HUMBLE

City State Zip Code
MIDLAND TX 79705-8625

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
W.C. EILAND OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11.1513

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
NANCY ELKAN

Mailing Address 3731 SHADE TREE

City State Zip Code
PORTAGE MI 49024-1036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1169.00

Date of Receipt

M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1515

Amount of Each Receipt this Period

195.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

10195.00

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 21 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
NANCY ELKAN

Mailing Address 3731 SHADE TREE

City State Zip Code
PORTAGE MI 49024-1036

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1169.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11.632

Amount of Each Receipt this Period

197.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROBERT ENGSTROM

Mailing Address 660 N. BELMONT

City State Zip Code
PORTERVILLE CA 93257-7203

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
E & E INDUSTRIES OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 1 0

Transaction ID: SA11.262

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
STEPHEN FAYETTE

Mailing Address 28 BENEDICT RD

City State Zip Code
BETHEL CT 06801-1235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NETAPP ACCOUNT EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.634

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1697.00

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: (check only one)	PAGE 22 / 105
	<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	

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) WILLIAM L FEENEY	Date of Receipt MM / DD / YYYY 10 / 11 / 2010
	Mailing Address 2824 ARDWICK CT	Transaction ID: SA11.635
	City State Zip Code FAIRFAX VA 22031-1402	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) DAVID FERGUSON	Date of Receipt MM / DD / YYYY 10 / 10 / 2010
	Mailing Address 1388 HIGHWAY 342	Transaction ID: SA11.636
	City State Zip Code PONTOTOC MS 38863-8903	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation IAEGS COMPUTER CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) SCOTT FERGUSON	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 3510 WATERLEAF COURT	Transaction ID: SA11.1524
	City State Zip Code LOUISVILLE KY 40207-5715	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation THE UNDERWRITERS GROUP EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

SUBTOTAL of Receipts This Page (optional)	3000.00
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 23 / 105
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial) JEANIE FIGG		Date of Receipt MM / DD / YYYY 10 / 13 / 2010
Mailing Address 3625 49TH STREET, NW		Transaction ID: SA11.1076
City WASHINGTON	State DC	Zip Code 20016-3214
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) TULL FLOREY		Date of Receipt MM / DD / YYYY 10 / 13 / 2010
Mailing Address 6003 GREEN TREE RD		Transaction ID: SA11.1531
City HOUSTON	State TX	Zip Code 77057-1417
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer BAKER BOTTS LLP	Occupation LAWYER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

C.

Full Name (Last, First, Middle Initial) FRANK FORNACA		Date of Receipt MM / DD / YYYY 10 / 13 / 2010
Mailing Address 2135 BULRUSH LANE		Transaction ID: SA11.1534
City CARDIFF	State CA	Zip Code 92007-1407
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SAN DIEGO CENTER FOR CHILDREN	Occupation DIRECTOR OF INFORMATION TECHNOLOGY	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
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 24 / 105
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
JAMES L. GAGAN

Mailing Address 408 WESSEX ROAD

City VALPARAISO State IN Zip Code 46385-7716

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation ENTREPRENEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 04 / 2010

Transaction ID: SA11.851

Amount of Each Receipt this Period 100000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NANCY GALLUPS

Mailing Address 4564 CLUB DRIVE, NE

City ATLANTA State GA Zip Code 30319-1124

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2010

Transaction ID: SA11.1093

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN GARVEY

Mailing Address 300 W. DOUGLAS SUITE 1050

City WICHITA State KS Zip Code 67202-2911

FEC ID number of contributing federal political committee. **C**

Name of Employer PETROLEUM, INC. Occupation EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 11 / 2010

Transaction ID: SA11.646

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100500.00

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 25 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
NEIL GERALD

Mailing Address 2393 WINDWARD WAY

City State Zip Code
NAPLES FL 34103-4760

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF AUTO DEALER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1096

Amount of Each Receipt this Period

3000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DALE GIALI

Mailing Address 16192 BIMINI LANE

City State Zip Code
HUNTINGTON BEACH CA 92649-2056

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOWREY LLP ATTORNEY

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1548

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RICHARD BAXTER GILLIAM

Mailing Address P.O. BOX 820

City State Zip Code
KESWICK VA 22947-0820

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CUMBERLAND RESOURCES FOUNDER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.877

Amount of Each Receipt this Period

150000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

153500.00

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 26 / 105
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
DANIEL GIRARD

Mailing Address 5121 KAPALUA LN.

City LAS VEGAS State NV Zip Code 89113-1244

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 10 / 2010
Transaction ID: SA11.647
 Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
IRA GOLDBERG

Mailing Address 10 BRADLEY CT.

City ESSEX FELLS State NJ Zip Code 07021-1207

FEC ID number of contributing federal political committee. **C**

Name of Employer LONGVIEW INVESTMENTS,LLC Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 13 / 2010
Transaction ID: SA11.1100
 Amount of Each Receipt this Period: 225.00
CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOE GOMERINGER

Mailing Address 95 W MAIN ST STE 18A

City CHESTER State NJ Zip Code 07930-2487

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 13 / 2010
Transaction ID: SA11.1556
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1475.00**

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 27 / 105
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial) SCOTT GREER		Date of Receipt MM / DD / YYYY 10 / 08 / 2010
Mailing Address 3832 ARNOLD STREET		Transaction ID: SA11.653
City HOUSTON	State TX	Zip Code 77005-2036
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer KING & SPALDING	Occupation LAWYER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.

Full Name (Last, First, Middle Initial) TODD GREMILLION		Date of Receipt MM / DD / YYYY 10 / 13 / 2010
Mailing Address 4515 MAGNOLIA		Transaction ID: SA11.1108
City BELLAIRE	State TX	Zip Code 77401-4230
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS	Occupation INFORMATION REQUESTED PER BEST EFFORTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.

Full Name (Last, First, Middle Initial) TIM GRIFFY		Date of Receipt MM / DD / YYYY 10 / 11 / 2010
Mailing Address 209 LONG CANYON COURT		Transaction ID: SA11.654
City RICHARDSON	State TX	Zip Code 75080-2669
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer ERNST & YOUNG	Occupation CPA	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

SUBTOTAL of Receipts This Page (optional)	▶	6250.00
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 28 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JERRY GRUNDHOFFER

Mailing Address 9811 WEST CHARLESTON BLVD
SUITE 2-163

City LAS VEGAS State NV Zip Code 89117-7528

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7400.00

Date of Receipt 10 / 11 / 2010
Transaction ID: SA11.656
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVE HALE

Mailing Address BOX 428

City MIAMI State TX Zip Code 79059-0428

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF-EMPLOYED Occupation CATTLE RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.1115
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT HALL

Mailing Address 2338 OCEAN DRIVE

City VERO BEACH State FL Zip Code 32963-2114

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.1116
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 6250.00

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 29 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
BEVERLY HAMILTON

Mailing Address 69 BYRON DRIVE

City AVON State CT Zip Code 06001-4569

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: SA11.840
 Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LISA HARMON

Mailing Address 2801 WEST BROADWAY F2

City COLUMBIA State MO Zip Code 65203-1239

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 08 / 2010
Transaction ID: SA11.663
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FARRELL HASS

Mailing Address 117 RAVENWOOD PLACE

City HOT SPRINGS State AR Zip Code 71901-7347

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF
Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 13 / 2010
Transaction ID: SA11.1574
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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 30 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JEFFREY HAWKINSON

Mailing Address 1403 N. SNYDER RD

City State Zip Code
JANESVILLE WI 53548-9439

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
JOHN DEERE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1575

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARTIN HEILMAN

Mailing Address 24 COURTHOUSE SQUARE
APT. # 704

City State Zip Code
ROCKVILLE MD 20850-2343

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1581

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WILLIAM HENRY

Mailing Address 15 APPLEBLOSSOM LANE

City State Zip Code
NEWTOWN CT 06470-2201

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF TELECOMMUNICATIONS

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 1 0

Transaction ID: SA11.666

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 750.00

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 31 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
SAMUEL DON HENSLEY JR

Mailing Address P.O. BOX 13708

City State Zip Code
JACKSON MS 39236-3708

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GI ASSOCIATES PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.667

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
BRIAN HERNANDEZ

Mailing Address 5950 GRAND PAVILION WAY, APT 316

City State Zip Code
ALEXANDRIA VA 22303-2248

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MEDTRUST PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11.252

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
PETER F. HERSCHEID

Mailing Address 538 OAK BLUFF ROAD

City State Zip Code
BRANSON MO 65616-9110

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HERSCHEID FAMILY ENTERTAINMENT OWNER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 40000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.869

Amount of Each Receipt this Period

40000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

41000.00

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 32 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
RONALD HILLBERG

Mailing Address 630 CRANE AVENUE, SUITE C

City State Zip Code
TURLOCK CA 95380-4549

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RONALD W. HILLBERG - ATTORNEY
RNEY ATTORNEY

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1586

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NOAH HOCHMAN

Mailing Address 4170 ADMIRALTY WAY
UNIT 119

City State Zip Code
MARINA DEL REY CA 90292-6217

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRIUMPH MANAGEMENT
REAL ESTATE EXECUTIVE

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1588

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LON HOCKER

Mailing Address 25 HINA STREET

City State Zip Code
HILO HI 96720

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ONSET COMPUTER CORP
ENGINEER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1131

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1500.00

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 33 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
DAVID HODGMAN

Mailing Address P.O. BOX 84000

City State Zip Code
SAN DIEGO CA 92138-4000

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SOUTHERN PRIDE, INC. EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.907

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BETSY HOLDEN

Mailing Address 325 WOODLEY ROAD

City State Zip Code
WINNETKA IL 60093-3740

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11.1135

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DWIGHT HOLM

Mailing Address 749 MARSOLAN AVE

City State Zip Code
SOLANA BEACH CA 92075-1932

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11.253

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

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: (check only one)	PAGE 34 / 105
	<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	

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) SCOTT HOPKINS	Date of Receipt MM / DD / YYYY 10 / 10 / 2010
	Mailing Address 140 WILLIAMSBURG LANE	Transaction ID: SA11.674
	City State Zip Code FORT WORTH TX 76107-1738	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation PINNACLE ANESTHESIA CONSULTANTS PARTNER, DOCTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) JAMES HUESING	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 7452 JAGER COURT	Transaction ID: SA11.1141
	City State Zip Code CINCINNATI OH 45230-4344	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SELF REAL ESTATE INVESTOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) H. WAYNE HUIZENGA	Date of Receipt MM / DD / YYYY 10 / 12 / 2010
	Mailing Address 450 E LAS OLAS BLVD. STE. 1500	Transaction ID: SA11.872
	City State Zip Code FT. LAUDERDALE FL 33301-2291	Amount of Each Receipt this Period 50000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HUIZENGA HOLDINGS, INC. CHAIRMAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 50000.00	

SUBTOTAL of Receipts This Page (optional)	51500.00
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: (check only one)	PAGE 35 / 105
	<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	

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) CHAILLE C. HUTCHESON	Date of Receipt MM / DD / YYYY 10 / 04 / 2010
	Mailing Address 3061 LOCKE LANE	Transaction ID: SA11.853
	City HOUSTON State TX Zip Code 77019-6201	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer HOME MAKER Occupation HOME MAKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

B.	Full Name (Last, First, Middle Initial) THOMAS T. HUTCHESON	Date of Receipt MM / DD / YYYY 10 / 04 / 2010
	Mailing Address 3061 LOCKE LANE	Transaction ID: SA11.854
	City HOUSTON State TX Zip Code 77019-6201	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer WINSTEAD PC Occupation ATTORNEY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

C.	Full Name (Last, First, Middle Initial) GAYE HUXOLL	Date of Receipt MM / DD / YYYY 10 / 08 / 2010
	Mailing Address 320 NE 98TH STREET	Transaction ID: SA11.679
	City MIAMI SHORES State FL Zip Code 33138-2410	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer LITTLER MENDELSON Occupation ATTORNEY Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional)	1500.00
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 36 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
BRUCE JACOBSON

Mailing Address 66 FINCH DRIVE

City ROSLYN State NY Zip Code 11576-2705

FEC ID number of contributing federal political committee. **C**

Name of Employer ES STRATEGIES Occupation CONSULTING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.1601
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
KURT JAGGERS

Mailing Address 2 BLUE OAKS CT.

City PORTOLA VALLEY State CA Zip Code 94028-8075

FEC ID number of contributing federal political committee. **C**

Name of Employer TA ASSOCIATES Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 05 / 2010
Transaction ID: SA11.683
 Amount of Each Receipt this Period 2500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KATHLEEN JARMIOLOWSKI

Mailing Address 910 N. CALVERT ST

City BALTIMORE State MD Zip Code 21202-3702

FEC ID number of contributing federal political committee. **C**

Name of Employer IZ TECHNOLOGIES Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.1147
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 3250.00

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 37 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
DENNIS W. JEFF

Mailing Address 1337 OLDE SAYBROOK ROAD

City State Zip Code
LANCASTER PA 17601-5323

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF INSURANCE

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Transaction ID: SA11.847

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
HOWARD JOHNSON

Mailing Address P.O. BOX 1309

City State Zip Code
TWISP WA 98856-1309

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF AUTHOR

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

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

Transaction ID: SA11.686

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BERNARD KARWICK

Mailing Address 178 NORTHSIDE DR

City State Zip Code
SAG HARBOR NY 11963-2001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF-EMPLOYED PILOT

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1611

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

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 38 / 105
(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
WILLIAM KIMMINS

Mailing Address 16 COUNTRY CLUB WOODS DR.

City State Zip Code
SAINT CHARLES MO 63303-3300

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1168

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JEFFREY KINGSTON

Mailing Address 70 BEAR RIDGE RD

City State Zip Code
ORINDA CA 94563-1002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1618

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROGER KLEIN

Mailing Address 63 BEETHOVEN AVE

City State Zip Code
NEWTON MA 02468-1732

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TREND SOFTWARE ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 9 / 2 0 1 0

Transaction ID: SA11.694

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1250.00**

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 39 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
DAVID KOSMISKI

Mailing Address 12787 N 5TH ST

City State Zip Code
PARKER CO 80134-9422

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CDOT ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 12 / 2010

Transaction ID: SA11.1175

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVEN KRAEMER

Mailing Address 9 CROWS NEST ROAD

City State Zip Code
BRONXVILLE NY 10708-4801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF EMPLOYED INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 449.00

Date of Receipt
MM / DD / YYYY
10 / 08 / 2010

Transaction ID: SA11.699

Amount of Each Receipt this Period
224.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BARBARA KROME

Mailing Address 5963 LA PLACE COURT
SUITE 104

City State Zip Code
CARLSBAD CA 92008-8822

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 13 / 2010

Transaction ID: SA11.1627

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1224.00**

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 40 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
CHARLES LAPWORTH III

Mailing Address 411 WALNUT ST. #7991

City State Zip Code
GREEN COVE SPRINGS FL 32043-3443

FEC ID number of contributing federal political committee. **C**

Name of Employer
INFORMATION REQUESTED PER
BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	1	0

Transaction ID: SA11.703

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NANCY LEAHY

Mailing Address 240 EAST DUDLEY AVENUE

City State Zip Code
WESTFIELD NJ 07090-3102

FEC ID number of contributing federal political committee. **C**

Name of Employer
HOMEMAKER

Occupation

HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	0

Transaction ID: SA11.1188

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BURT LERMAN

Mailing Address 305 HEATHER CIR

City State Zip Code
SOUTH LAKE TAHOE CA 96150-6126

FEC ID number of contributing federal political committee. **C**

Name of Employer
RETIRED

Occupation

RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	0		2	0	1	0

Transaction ID: SA11.708

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶

1500.00

TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER: PAGE 41 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
MARC LEVINE

Mailing Address 905 GREENLEAF AVE

City State Zip Code
WILMETTE IL 60091-2704

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CHICAGO ASSET FUNDING OWNER/FOUNDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.710

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DONALD LIGHT

Mailing Address 2402 SHARON OAKS DR

City State Zip Code
MENLO PARK CA 94025-6829

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MMC ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1010.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 3 / 2 0 1 0

Transaction ID: SA11.267

Amount of Each Receipt this Period
1010.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEORGE LONG

Mailing Address 1 MYRTLE WARBLER ROAD

City State Zip Code
HILTON HEAD ISLAND SC 29926-1908

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.712

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3760.00**

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 42 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
WADE MACQUARRIE
Mailing Address 12200 ZIELIAN COURT
City TUSTIN State CA Zip Code 92782-1296
FEC ID number of contributing federal political committee. **C**
Name of Employer CREWS MACQUARRIE & ASSOCIATES Occupation ACTUARY
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00
Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.1661
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRIAN MANGRAVITE
Mailing Address 45 ELMWOOD DRIVE
City PARSIPPANY State NJ Zip Code 07054-3609
FEC ID number of contributing federal political committee. **C**
Name of Employer PRIDE INC Occupation BUSINESS PROCESS CONSULTANT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 250.00
Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.1208
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN MARTIN
Mailing Address BOX 50190
City CASPER State WY Zip Code 82605-0190
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 5000.00
Date of Receipt 10 / 04 / 2010
Transaction ID: SA11.281
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 5500.00
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 43 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
THOMAS KIRK MARVIN

Mailing Address 5507 104TH AVENUE NE

City KIRKLAND State WA Zip Code 98033-7408

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 13 / 2010
Transaction ID: SA11.876
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCOTT MASON

Mailing Address 9730 BEMAN WOODS WAY

City POTOMAC State MD Zip Code 20854-5458

FEC ID number of contributing federal political committee. **C**

Name of Employer S. K. M. ENTERPRISES, LLC Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 03 / 2010
Transaction ID: SA11.269
Amount of Each Receipt this Period 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
KADE L. MATTHEWS

Mailing Address P.O. BOX 1170

City CLARENDON State TX Zip Code 79226-1170

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation RANCHER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 06 / 2010
Transaction ID: SA11.865
Amount of Each Receipt this Period 15000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20500.00

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: (check only one)	PAGE 44 / 105
	<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	

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) JACK MAYES	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 8 TORTOISE SHELL	Transaction ID: SA11.1669
	City State Zip Code COTO DE CAZA CA 92679-5205	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation CARDBOARD GOLD INC OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) JACK H MAYFIELD JR	Date of Receipt MM / DD / YYYY 10 / 07 / 2010
	Mailing Address P.O. BOX 570365 1819 ST JAMES PLACE	Transaction ID: SA11.722
	City State Zip Code HOUSTON TX 77257-0365	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation GOLDSTON OIL CORPORATION CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

C.	Full Name (Last, First, Middle Initial) JAMES MCCORMICK	Date of Receipt MM / DD / YYYY 10 / 10 / 2010
	Mailing Address 5 PREMIUM POINT ROAD	Transaction ID: SA11.725
	City State Zip Code NEW ROCHELLE NY 10801	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation FIRST MANHATTAN CONSULTING GROUP MANAGEMENT CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	2750.00
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: (check only one)	PAGE 45 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
THOMAS MCINTYRE

Mailing Address P.O. BOX 2466

City ORLEANS State MA Zip Code 02653-6466

FEC ID number of contributing federal political committee. **C**

Name of Employer MCINTYRE,FREEDMAN & FLYNN Occupation FINANCIAL ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 13 / 2010

Transaction ID: SA11.1674

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
THOMAS MCKERNAN

Mailing Address 1070 FALLEN LEAF RD.

City ARCADIA State CA Zip Code 91006-1903

FEC ID number of contributing federal political committee. **C**

Name of Employer AUTO CLUB Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 13 / 2010

Transaction ID: SA11.1218

Amount of Each Receipt this Period: 5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MYRON MCKINNEY

Mailing Address 1648 MADELYN DR

City CARTHAGE State MO Zip Code 64836-8703

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 12 / 2010

Transaction ID: SA11.1219

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5750.00

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 46 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
STEVEN G. MIHAYLO

Mailing Address P.O. BOX 19790

City State Zip Code
RENO NV 89511-2471

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 1 0

Transaction ID: SA11.852

Amount of Each Receipt this Period
25000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM W. MOORE

Mailing Address 11980 TURTLE BEACH ROAD

City State Zip Code
NORTH PALM BEACH FL 33408-2937

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11.734

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GEORGE MOOSBURNER

Mailing Address 114 CONWAY AVENUE

City State Zip Code
NARBERTH PA 19072-2202

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PA CAPITAL ADVISORS, LLC APPRAISER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 4 / 2 0 1 0

Transaction ID: SA11.855

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **25750.00**

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 47 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
ROBERT MORRIS

Mailing Address 3540 WASHINGTON STREET

City State Zip Code
SAN FRANCISCO CA 94118-1849

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11.891

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DANIEL MURRAY

Mailing Address 5547 ASHBOURNE RD

City State Zip Code
HALETHORPE MD 21227-2813

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1692

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DONALD NELSON

Mailing Address 1 WINGED FOOT LN

City State Zip Code
NEWPORT BEACH CA 92660-5111

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1243

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

10750.00

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 48 / 105
(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)
American Crossroads

A. Full Name (Last, First, Middle Initial)
WILLIAM NOBLE

Mailing Address 421 W. 3RD STREET
#1510

City State Zip Code
AUSTIN TX 78701-4172

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NOBLE STRATEGIC PARTNERS PRESIDENT/CEO

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1247

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL NOVOGRADAC

Mailing Address 244 GLORIETTA BLVD

City State Zip Code
ORINDA CA 94563-3547

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
NOVOGRADAC & COMPANY LLP CPA

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.741

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
EMMET O'NEAL III

Mailing Address 2500 MTN. BROOK PKWY.

City State Zip Code
BIRMINGHAM AL 35223-1218

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1709

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1500.00**

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 49 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
MICHAEL ORLANDO
 Mailing Address 2039 SAN ELIJO AVE.
 City State Zip Code
CARDIFF BY THE SEA CA 92007-1726
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
SUNNYLAND MILLS FOOD MANUFACTURER
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 3 / 2 0 1 0
Transaction ID: SA11.1250
 Amount of Each Receipt this Period
 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EDWARD PAGE
 Mailing Address P.O. BOX 26735
 City State Zip Code
SHAWNEE MISSION KS 66225-6735
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
SELF EMPLOYED CONSULTANT
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 0 / 2 0 1 0
Transaction ID: SA11.745
 Amount of Each Receipt this Period
 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JIM PARATORE
 Mailing Address 16255 VENTURA BLVD.
 City State Zip Code
ENCINO CA 91436-2302
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS
 Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 0 / 1 3 / 2 0 1 0
Transaction ID: SA11.1254
 Amount of Each Receipt this Period
 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2250.00
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 50 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
MICHAEL PERRIN

Mailing Address 4711 NORTHSIDE DR

City ATLANTA State GA Zip Code 30327-4551

FEC ID number of contributing federal political committee. **C**

Name of Employer COBB COUNTY TOYOTA Occupation CAR SALESMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt: 10 / 13 / 2010
Transaction ID: SA11.1259
Amount of Each Receipt this Period: 2000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BOB J. PERRY

Mailing Address PO BOX 34153

City HOUSTON State TX Zip Code 77234-4153

FEC ID number of contributing federal political committee. **C**

Name of Employer PERRY HOMES Occupation HOME BUILDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7000000.00

Date of Receipt: 10 / 04 / 2010
Transaction ID: SA11.850
Amount of Each Receipt this Period: 2000000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BOB J. PERRY

Mailing Address PO BOX 34153

City HOUSTON State TX Zip Code 77234-4153

FEC ID number of contributing federal political committee. **C**

Name of Employer PERRY HOMES Occupation HOME BUILDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7000000.00

Date of Receipt: 10 / 05 / 2010
Transaction ID: SA11.863
Amount of Each Receipt this Period: 2000000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 4002000.00

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 51 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
BOB J. PERRY

Mailing Address PO BOX 34153

City HOUSTON State TX Zip Code 77234-4153

FEC ID number of contributing federal political committee. **C**

Name of Employer PERRY HOMES Occupation HOME BUILDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 7000000.00

Date of Receipt 10 / 12 / 2010

Transaction ID: SA11.874

Amount of Each Receipt this Period 1000000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN M. PETERMAN

Mailing Address 615 E BROOKSIDE DRIVE

City CROWN POINT State IN Zip Code 46307-4369

FEC ID number of contributing federal political committee. **C**

Name of Employer WHITE PETERMAN PROPERTIES Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 11 / 2010

Transaction ID: SA11.868

Amount of Each Receipt this Period 50000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK PETTINGA

Mailing Address P.O. BOX 3203

City EVANSVILLE State IN Zip Code 47731-3203

FEC ID number of contributing federal political committee. **C**

Name of Employer PETTINGA Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 10 / 2010

Transaction ID: SA11.747

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1055000.00

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 52 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
STEPHEN PIAZZA

Mailing Address 8205 VALLEY VIEW DRIVE

City State Zip Code
CLARKSTON MI 48348-4042

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
QUICKEN LOANS MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 13 / 2010

Transaction ID: SA11.1265

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BARRETT W. PIERCE

Mailing Address 2905 W 115TH STREET

City State Zip Code
AMARILLO TX 79102

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF OIL & GAS PRODUCER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt
MM / DD / YYYY
10 / 04 / 2010

Transaction ID: SA11.848

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARK PORTER

Mailing Address 1104 E BRIGHTON RD

City State Zip Code
NAPERVILLE IL 60563-3303

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
MORGAN BIRGE & ASSOCIATES, INC. GENERAL MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
10 / 13 / 2010

Transaction ID: SA11.883

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 21000.00

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 53 / 105
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) HOMER PRESSLEY		Date of Receipt
	Mailing Address 126 HUNINGTON CHASE DRIVE		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MADISON	AL	35758-6921
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.750
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) JOHN PRICE, III		Date of Receipt
	Mailing Address P.O. BOX 856		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SENATOBIA	MS	38668-0856
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF EMPLOYED		Occupation INSURANCE AGENT	Transaction ID: SA11.1272
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) CHRISTOPHER RANDOLPH		Date of Receipt
	Mailing Address 2784 MARSHALL LAKE DRIVE		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	OAKTON	VA	22124-1148
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer OPTIMUM OPTICAL		Occupation OWNER	Transaction ID: SA11.754
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="450.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 54 / 105
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) THOMAS RAQUE		Date of Receipt
	Mailing Address 1802 ARNOLD PALMER BV.		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LOUISVILLE	KY	40245-5276
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer STIFEL, INC.		Occupation BROKER	Transaction ID: SA11.755
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

B.	Full Name (Last, First, Middle Initial) JOHN RAY		Date of Receipt
	Mailing Address 172 DENNY RD		<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LEBANON	TN	37087-0904
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF		Occupation INSURANCE AGENT	Transaction ID: SA11.758
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

C.	Full Name (Last, First, Middle Initial) TIMOTHY REILY		Date of Receipt
	Mailing Address 452 AUDUBON ST		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	NEW ORLEANS	LA	70118-4946
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer RETIRED		Occupation RETIRED	Transaction ID: SA11.1278
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="750.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 55 / 105
(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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
WERNER REINARTZ

Mailing Address P.O. BOX 1710

City State Zip Code
BETHLEHEM PA 18016-1710

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
REYNOLDS & REYNOLDS EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11.1741

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DANIEL REINDERS

Mailing Address 6702 CLOVERNOOK CIR

City State Zip Code
MIDDLETON WI 53562-3865

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
IDEAL MANUFACTURING & SAL-ES SALESMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1742

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN RHOADS

Mailing Address 16012 FM 1954

City State Zip Code
WICHITA FALLS TX 76310-0377

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SCHALK ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.762

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

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 56 / 105
(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)
American Crossroads

A. Full Name (Last, First, Middle Initial)
CHRISTINE RIES

Mailing Address 502 ANSLEY WALK TER NE

City ATLANTA State GA Zip Code 30309-2758

FEC ID number of contributing federal political committee. **C**

Name of Employer GEORGIA INSTITUTE OF TECHNOLOGY Occupation PROFESSOR OF ECONOMICS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 10 / 2010
Transaction ID: SA11.764
 Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CHARLES ROGERS

Mailing Address 11122 EAGLE VIEW DRIVE

City SANDY State UT Zip Code 84092-4958

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11.770
 Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT B. ROWLING

Mailing Address 600 EAST LAS COLINAS BLVD.
STE. 1900

City IRVING State TX Zip Code 75039-5601

FEC ID number of contributing federal political committee. **C**

Name of Employer TRT HOLDINGS INC. Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500000.00

Date of Receipt: 10 / 05 / 2010
Transaction ID: SA11.861
 Amount of Each Receipt this Period: 1000000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1000750.00

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 57 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
NORMAN RUND

Mailing Address 1726 WROXTON CT

City HOUSTON State TX Zip Code 77005-1717

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 10 / 2010
Transaction ID: SA11.773
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FREDERICK SALEK

Mailing Address 51 CASTLE HEIGHTS AVE

City TARRYTOWN State NY Zip Code 10591-3701

FEC ID number of contributing federal political committee. **C**

Name of Employer SELF Occupation ATTORNEY - MEDIATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 03 / 2010
Transaction ID: SA11.892
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JERRY SCHEER

Mailing Address P.O. BOX 8272

City NEWPORT BEACH State CA Zip Code 92658-8272

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt: 10 / 11 / 2010
Transaction ID: SA11.777
 Amount of Each Receipt this Period: 250.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 750.00

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 58 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
ELEANOR SEIFERTH
Mailing Address 106 HILER RD.

City State Zip Code
SAN ANTONIO TX 78209-2731

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
ST. PHILIP'S COLLEGE LIBRARIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11.781

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DAVID SHAFFER
Mailing Address 18534 CALLE LA SERRA

City State Zip Code
RANCHO SANTA FE CA 92091-0148

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1302

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
R W SHEPARD
Mailing Address P.O. BOX 1830

City State Zip Code
HARLINGEN TX 78551-1830

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SHEPARD WALTON KING INS. GRP. EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1780

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

3000.00

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 59 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
CHARMAINE SICILIANI

Mailing Address 3003 O STREET

City State Zip Code
SACRAMENTO CA 95816-6516

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 10 / 2010

Transaction ID: SA11.788

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
CHARMAINE SICILIANI

Mailing Address 3003 O STREET

City State Zip Code
SACRAMENTO CA 95816-6516

FEC ID number of contributing federal political committee. **C**

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Occupation

INFORMATION REQUESTED PER BEST EFFORTS

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 10 / 2010

Transaction ID: SA11.789

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DAVID SMITH

Mailing Address 10288 KALI AVE NE

City State Zip Code
ALBERTVILLE MN 55301-4013

FEC ID number of contributing federal political committee. **C**

Name of Employer
POMP'S TIRE

Receipt For:
 Primary General
 Other (specify) ▼

Occupation
MANAGER

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y
10 / 13 / 2010

Transaction ID: SA11.1309

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

750.00

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 60 / 105
(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
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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
JOHN SNEDDEN

Mailing Address 1702 INDUSTRIAL AVE

City SANDPOINT State ID Zip Code 83864-9025

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2010

Transaction ID: SA11.1310

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
E. WAYNE SOUTHARDS

Mailing Address 1001 WYNDHAM WAYA
APT. 1217

City KNOXVILLE State TN Zip Code 37923

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 13 / 2010

Transaction ID: SA11.1794

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
MARK STAGGS

Mailing Address 15902 HIDDEN COVE

City HOSUTON State TX Zip Code 77079-2456

FEC ID number of contributing federal political committee. **C**

Name of Employer BANK OF OKLAHOMA Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 13 / 2010

Transaction ID: SA11.1899

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1250.00

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 61 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
GLENN STALEY

Mailing Address 4515 BOWSER #B

City State Zip Code
DALLAS TX 75219-2112

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GLENN A. STALEY MANAGEMEN- T, INC OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1314

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARK STALNECKER

Mailing Address 11 CARRIAGE RD.

City State Zip Code
GREENVILLE DE 19807-2237

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
UNIVERSITY OF DELAWARE INVESTMENT MANAGEMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 0 / 2 0 1 0

Transaction ID: SA11.799

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MARY O. STANLEY

Mailing Address 280 W CHERRY CIRCLE

City State Zip Code
MEMPHIS TN 38117-3002

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.875

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2750.00

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 62 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JAMES STEBBINS

Mailing Address 222 E WISCONSIN AVE
STE 107

City State Zip Code
LAKE FOREST IL 60045-1700

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
STEBBINSTRADING, LLC TRADER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Transaction ID: SA11.801

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JEANETTE STEWART

Mailing Address 2510 WARREN
#3407

City State Zip Code
CHEYENNE WY 82001-3163

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PRN PHARMACEUTICAL RESEAR-
CH NETWORK COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 3 / 2 0 1 0

Transaction ID: SA11.275

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
R C STRAUTMAN

Mailing Address 70 EAST 10TH STREET
#10J

City State Zip Code
NEW YORK NY 10003-5113

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
TRUMONT ADVISORS LTD. STRATEGIC ADVISOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1810

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2500.00**

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 63 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
JACK STURGEON

Mailing Address 1901 MOUNT VERNON AVENUE

City State Zip Code
POINT PLEASANT WV 25550-1910

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 1 0

Transaction ID: SA11.276

Amount of Each Receipt this Period

300.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROBERT SULLIVAN

Mailing Address 2111 WILSHIRE, BLVD.

City State Zip Code
SANTA MONICA CA 90403-5703

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF REALTOR

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1319

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RICHARD SWANSON

Mailing Address 109 NORTH 54TH STREET

City State Zip Code
OMAHA NE 68132-2810

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF HANDYMAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.803

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1300.00

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 64 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
ROBERT THOMAS JR

Mailing Address 170 THORN HILL ROAD

City State Zip Code
WARRENDALE PA 15086-7528

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CERVIS INC OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1820

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
BRUCE THORNTON

Mailing Address 4110 SPYGLASS HILLS

City State Zip Code
KATY TX 77450-5230

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CMS TECHNOLOGY, INC EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 1 0

Transaction ID: SA11.809

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
RAYMOND TRONCOZO

Mailing Address PSC 62 BOX 7022

City State Zip Code
APO AE 09643-7001

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
PAE ELECTRONICS TECHNICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 1 0

Transaction ID: SA11.813

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1000.00

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 65 / 105
(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial) DONALD J. TRUMP		Date of Receipt MM / DD / YYYY 10 / 06 / 2010
Mailing Address 725 5TH AVENUE		Transaction ID: SA11.864
City NEW YORK	State NY	Zip Code 10022-2519
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50000.00
Name of Employer SELF	Occupation REAL ESTATE DEVELOPER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

B.

Full Name (Last, First, Middle Initial) RON ULRICH		Date of Receipt MM / DD / YYYY 10 / 11 / 2010
Mailing Address 329 DANS HIGHWAY		Transaction ID: SA11.816
City NEW CANAAN	State CT	Zip Code 06840-2508
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer BREITHORN CAPITAL	Occupation INVESTMENTS	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) PAUL UNDERWOOD		Date of Receipt MM / DD / YYYY 10 / 04 / 2010
Mailing Address 24 CENTRAL PARK SOUTH		Transaction ID: SA11.849
City NEW YORK	State NY	Zip Code 10019-1691
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10000.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	61000.00
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 66 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
STEPHEN VAN DYCK

Mailing Address 122 HARBORVIEW LANE

City State Zip Code
BELLEAIR BLUFFS FL 33770-2605

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Transaction ID: SA11.1835

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN VOLDSETH

Mailing Address 1648 MT HWY 294

City State Zip Code
MARTINSDALE MT 59053-8759

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11.820

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID WALKER

Mailing Address 123 ESSEX ROAD

City State Zip Code
CHESTNUT HILL MA 02467-1318

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
CAMBRIDGE TRUST PORTFOLIO MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.822

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 4000.00

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 67 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
ROBERT WEBB

Mailing Address 1670 BROADWAY

City State Zip Code
DENVER CO 80202-4801

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
GHP HORWATH CPA

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Transaction ID: SA11.826

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DONALD WEBER

Mailing Address 130 RAINBOW RD
PMB 3088

City State Zip Code
LIVINGSTON TX 77399-1030

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11.828

Amount of Each Receipt this Period

500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DEREK WEILBAECHER

Mailing Address 1310 STAR DR NE

City State Zip Code
ATLANTA GA 30319-3418

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation
SELF RESTAURANT OWNER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Transaction ID: SA11.1846

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1250.00

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: (check only one)	PAGE 68 / 105
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) RON WEISHAAR	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 102 RIO VISTA P.O. BOX 950	Transaction ID: SA11.1341
	City State Zip Code HEREFORD TX 79045-6406	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BARRETT-CROFOOT FEEDYARDS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.	Full Name (Last, First, Middle Initial) WILLIAM WHITTEN	Date of Receipt MM / DD / YYYY 10 / 05 / 2010
	Mailing Address 8720 E 105TH ST	Transaction ID: SA11.831
	City State Zip Code TULSA OK 74133-7057	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation NORDAM EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) DENNIS WILKE	Date of Receipt MM / DD / YYYY 10 / 13 / 2010
	Mailing Address 726 WOODBRIDGE DRIVE	Transaction ID: SA11.1860
	City State Zip Code OAKDALE PA 15071-9701	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ROSEDALE TECHNICAL INSTIT- UTE SCHOOL DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
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 69 / 105
(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial) SCOTT WOODSON		Date of Receipt MM / DD / YYYY 10 / 13 / 2010
Mailing Address 7730 CAMINO SERENO		Transaction ID: SA11.1351
City ESCONDIDO	State CA	Zip Code 92029-4702
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer GCAS, INC.	Occupation SOFTWARE ENGINEER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

B.

Full Name (Last, First, Middle Initial) ROBERT Q. WYCKOFF, JR.		Date of Receipt MM / DD / YYYY 10 / 01 / 2010
Mailing Address 831 OENOKE RIDGE ROAD		Transaction ID: SA11.839
City NEW CANAAN	State CT	Zip Code 06840-3130
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer TWEEDY, BROWNE	Occupation MANAGING DIRECTOR	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.

Full Name (Last, First, Middle Initial) DOUGLAS YARROW		Date of Receipt MM / DD / YYYY 10 / 13 / 2010
Mailing Address 5019 LAKEVIEW CANYON ROAD		Transaction ID: SA11.1356
City WESTLAKE VILLAGE	State CA	Zip Code 91362-5210
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer NORTH RANCH PARTNERS, LLC	Occupation MANAGING PARTNER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

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 70 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
KENNETH ZADWICK

Mailing Address 328 SEWIND DR.

City VALLEJO State CA Zip Code 94590-8137

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 13 / 2010
Transaction ID: SA11.1871
 Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LINN, CAMPE AND RIZZO, LTD

Mailing Address 215 NORTH ML KING AVENUE

City WAUKEGAN State IL Zip Code 60085-4235

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 04 / 2010
Transaction ID: SA11.856
 Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NEW PRIME, INC.

Mailing Address 2740 N MAYFAIR AVENUE

City SPRINGFIELD State MO Zip Code 65803-5084

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 30000.00

Date of Receipt: 10 / 01 / 2010
Transaction ID: SA11.841
 Amount of Each Receipt this Period: 30000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 31500.00

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 71 / 105
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
OVERLY HAUTZ COMPANY

Mailing Address P.O. BOX 837
215 SOUTH WEST STREET

City State Zip Code
LEBANON OH 45036-0837

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	2	/	2	0	1	0

Transaction ID: SA11.871

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROONEY HOLDINGS

Mailing Address 5601 SOUTH 122ND EAST AVENUE

City State Zip Code
TULSA OK 74146

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	1	0

Transaction ID: SA11.879

Amount of Each Receipt this Period
50000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEPHENS INVESTMENTS HOLDINGS LLC

Mailing Address 111 CENTER ST.

City State Zip Code
LITTLE ROCK AR 72201-4402

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	3	/	2	0	1	0

Transaction ID: SA11.878

Amount of Each Receipt this Period
100000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **151000.00**

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 72 / 105

(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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
TRT HOLDINGS, INC.

Mailing Address 600 LAS COLINAS BLVD. E
STE. 1900

City State Zip Code
IRVING TX 75039-5626

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2341880.38

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Transaction ID: SA11.862

Amount of Each Receipt this Period

1000000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
UNIVERSAL HEALTH CARE GROUP, INC.

Mailing Address 100 CENTRAL AVENUE
STE. 200

City State Zip Code
ST. PETERSBURG FL 33701-3324

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 0 6 / 2 0 1 0

Transaction ID: SA11.866

Amount of Each Receipt this Period

25000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1025000.00

TOTAL This Period (last page this line number only)

7887476.00

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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Michael Britt	Transaction ID: B.029 Date of Disbursement 10 / 08 / 2010
	Mailing Address 2024 Shining Feather Lane	Amount of Each Disbursement this Period 5000.00
	City Las Vegas State NV Zip Code 89134	
	Purpose of Disbursement Consulting, political	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) Arena Communications	Transaction ID: B.005 Date of Disbursement 10 / 08 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period 23109.54
	City Salt Lake City State UT Zip Code 84104	
	Purpose of Disbursement Postage, Printing/Production	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) Arena Communications	Transaction ID: B.006 Date of Disbursement 10 / 11 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period -23109.54
	City Salt Lake City State UT Zip Code 84104	
	Purpose of Disbursement See Schedule E	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) ▼

SUBTOTAL of Disbursements This Page (optional)	5000.00
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)

<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: B.007 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Salt Lake City State UT Zip Code 84104	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage, Printing/Production	<input type="text" value="8829.86"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: B.008 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Salt Lake City State UT Zip Code 84104	Amount of Each Disbursement this Period
	Purpose of Disbursement See Schedule E	<input type="text" value="-8829.86"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: B.009 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Salt Lake City State UT Zip Code 84104	Amount of Each Disbursement this Period
	Purpose of Disbursement Postage, Printing/Production	<input type="text" value="204703.26"/>
	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="204703.26"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 75 / 105

<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Arena Communications</p> <p>Mailing Address 1780 W Sequoia Circle</p> <p>City Salt Lake City State UT Zip Code 84104</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.010</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period -204703.26</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Arena Communications</p> <p>Mailing Address 1780 W Sequoia Circle</p> <p>City Salt Lake City State UT Zip Code 84104</p> <p>Purpose of Disbursement Postage, Printing/Production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.011</p> <p>Date of Disbursement 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 24725.62</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Arena Communications</p> <p>Mailing Address 1780 W Sequoia Circle</p> <p>City Salt Lake City State UT Zip Code 84104</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.012</p> <p>Date of Disbursement 10 / 11 / 2010</p> <p>Amount of Each Disbursement this Period -24725.62</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-204703.26

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)

PAGE 76 / 105

<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Arena Communications <hr/> Mailing Address 1780 W Sequoia Circle <hr/> City Salt Lake City State UT Zip Code 84104 <hr/> Purpose of Disbursement See Schedule E Candidate Name Category/Type <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: B.045 Date of Disbursement 10 / 02 / 2010 <hr/> Amount of Each Disbursement this Period -6685.54 <hr/> Original exp. disclosed on M10
B.	Full Name (Last, First, Middle Initial) Bearcom <hr/> Mailing Address 5905 S Decatur #13 <hr/> City Las Vegas State NV Zip Code 89118 <hr/> Purpose of Disbursement Phone rental Candidate Name Category/Type <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: B.032 Date of Disbursement 10 / 11 / 2010 <hr/> Amount of Each Disbursement this Period 4594.25
C.	Full Name (Last, First, Middle Initial) Bluefront Strategies, LLC <hr/> Mailing Address 44 Canal Center Plaza Ste. G1 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Advertising, Non-Candidate Candidate Name Category/Type <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: B.028 Date of Disbursement 10 / 08 / 2010 <hr/> Amount of Each Disbursement this Period 73800.00

SUBTOTAL of Disbursements This Page (optional) ▶	71708.71
TOTAL 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)
American Crossroads

A. Full Name (Last, First, Middle Initial)
Carefirst, Blue Cross Blue Shield

Mailing Address PO Box 79749

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement
Health Insurance

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Transaction ID: B.034

Date of Disbursement

10 / 11 / 2010

Amount of Each Disbursement this Period

2978.00

B. Full Name (Last, First, Middle Initial)
Crossroads Media, LLC

Mailing Address 66 Canal Center Plaza
Ste. 555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Deposit, Media Placement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B.001

Date of Disbursement

10 / 01 / 2010

Amount of Each Disbursement this Period

343544.20

C. Full Name (Last, First, Middle Initial)
Crossroads Media, LLC

Mailing Address 66 Canal Center Plaza
Ste. 555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
See Schedule E

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: B.002

Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

-343544.20

SUBTOTAL of Disbursements This Page (optional) ▶

2978.00

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)

<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.003 Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 768499.20</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.004 Date of Disbursement 10 / 05 / 2010</p> <p>Amount of Each Disbursement this Period -768499.20</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.013 Date of Disbursement 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 770144.20</p>

SUBTOTAL of Disbursements This Page (optional) ▶

770144.20

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)

PAGE 79 / 105

<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: B.014 Date of Disbursement 10 / 12 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period -770144.20
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement See Schedule E	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.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: B.015 Date of Disbursement 10 / 08 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period 505483.60
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Deposit, Media Placement	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:	

C.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: B.016 Date of Disbursement 10 / 12 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period -505483.60
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement See Schedule E	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:	

SUBTOTAL of Disbursements This Page (optional)	-770144.20
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)

<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <hr/> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <hr/> <p>City Alexandria State VA Zip Code 22314</p> <hr/> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.019 Date of Disbursement 10 / 13 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period 75450.00</p> <hr/> <p>See Schedule E on 30G Report</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <hr/> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <hr/> <p>City Alexandria State VA Zip Code 22314</p> <hr/> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.020 Date of Disbursement 10 / 13 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period 394990.00</p> <hr/> <p>See Schedule E on 30G Report</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <hr/> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <hr/> <p>City Alexandria State VA Zip Code 22314</p> <hr/> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.021 Date of Disbursement 10 / 13 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period 138280.00</p> <hr/> <p>See Schedule E on 30G Report</p>

SUBTOTAL of Disbursements This Page (optional) ▶

608720.00

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)

<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.024 Date of Disbursement 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 669757.50</p> <p>See Schedule E on 30G Report</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.025 Date of Disbursement 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 250248.01</p> <p>See Schedule E on 30G Report</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.026 Date of Disbursement 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 92750.00</p> <p>See Schedule E on 30G Report</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1012755.51

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)

<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Direct Dial</p> <p>Mailing Address 107 South West Street PMB 499</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Email maintenance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.027 Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 1295.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Emotive, LLC</p> <p>Mailing Address 2800 Shirlington Road Ste. 901</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Online advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.031 Date of Disbursement 10 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 20000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Emotive, LLC</p> <p>Mailing Address 2800 Shirlington Road Ste. 901</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.044 Date of Disbursement 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period -20000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1295.00

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)

<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)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Holiday Inn Express</p> <p>Mailing Address 6220 S Rainbow Blvd.</p> <p>City Las Vegas State NV Zip Code 89113</p> <p>Purpose of Disbursement Deposit, lodging</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.033</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="14952.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) iContribute</p> <p>Mailing Address PO Box 8522</p> <p>City Falls Church State VA Zip Code 22041</p> <p>Purpose of Disbursement Website contribution processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.043</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="670.29"/></p>
<p>C. Full Name (Last, First, Middle Initial) Kantar Media</p> <p>Mailing Address PO Box 7247-9301</p> <p>City Philadelphia State PA Zip Code 19170</p> <p>Purpose of Disbursement Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.041</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;"><input type="text" value="3000.00"/></p>

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)

<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Kintera Blackbud	Transaction ID: B.042 Date of Disbursement 10 / 13 / 2010
	Mailing Address 2000 Daniel Island Drive	Amount of Each Disbursement this Period 9613.31
	City Charleston State SC Zip Code 29492	
	Purpose of Disbursement Website contribution processing	
	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) Lexis Nexis	Transaction ID: B.035 Date of Disbursement 10 / 13 / 2010
	Mailing Address PO Box 7247-7090	Amount of Each Disbursement this Period 954.00
	City Philadelphia State PA Zip Code 19170-7090	
	Purpose of Disbursement Subscription	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Majority Strategies	Transaction ID: B.046 Date of Disbursement 10 / 01 / 2010
	Mailing Address 135 Professional Drive Ste. 104	Amount of Each Disbursement this Period -73541.45
	City Ponte Vedra Beach State FL Zip Code 32082	
	Purpose of Disbursement See Schedule E	
	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) ▼

Original exp. disclosed on M10

SUBTOTAL of Disbursements This Page (optional)	-62974.14
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)

<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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
McKenna & Associates

Mailing Address 2321 North Kentucky St.

City Arlington State VA Zip Code 22205

Purpose of Disbursement
Consulting, development

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: B.030
Date of Disbursement

10 / 08 / 2010

Amount of Each Disbursement this Period

12500.00

B.

Full Name (Last, First, Middle Initial)
Mentzer Media Services, Inc.

Mailing Address 600 Fairmont Avenue
Ste. 306

City Towson State MD Zip Code 21286

Purpose of Disbursement
Deposit, Media Placement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: B.022
Date of Disbursement

10 / 13 / 2010

Amount of Each Disbursement this Period

202400.00

See Schedule E on 30G Report

C.

Full Name (Last, First, Middle Initial)
Mentzer Media Services, Inc.

Mailing Address 600 Fairmont Avenue
Ste. 306

City Towson State MD Zip Code 21286

Purpose of Disbursement
Deposit, Media Placement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: B.023
Date of Disbursement

10 / 13 / 2010

Amount of Each Disbursement this Period

177450.00

See Schedule E on 30G Report

SUBTOTAL of Disbursements This Page (optional)

392350.00

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)

<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: B.017 Date of Disbursement 10 / 08 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period 72380.00
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement Direct Mail, Postage	
	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) ▼
		See Schedule E on 30G Report

B.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: B.018 Date of Disbursement 10 / 08 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period 570970.89
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement Direct Mail, Postage	
	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) ▼
		See Schedule E on 30G Report

C.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: B.047 Date of Disbursement 10 / 08 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period -97041.42
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement See Schedule E	
	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) ▼
		Original exp. disclosed on M10

SUBTOTAL of Disbursements This Page (optional)	546309.47
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)

<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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
Olsen & Shuvalov

Transaction ID: B.048
Date of Disbursement

Mailing Address 1609 Shoal Creek Blvd.
#203

10 / 08 / 2010

City Austin State TX Zip Code 78701

Amount of Each Disbursement this Period

-149341.29

Purpose of Disbursement
See Schedule E

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Original exp. disclosed
on M10

State: District:

B.

Full Name (Last, First, Middle Initial)
Public Opinion Strategies

Transaction ID: B.036
Date of Disbursement

Mailing Address 214 North Fayette St.

10 / 13 / 2010

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

16500.00

Purpose of Disbursement
Survey & polling

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District: 00

C.

Full Name (Last, First, Middle Initial)
The Tarrance Group

Transaction ID: B.037
Date of Disbursement

Mailing Address 201 N Union St.
Ste. 410

10 / 13 / 2010

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

22469.00

Purpose of Disbursement
Survey & polling

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District: 00

SUBTOTAL of Disbursements This Page (optional) ▶

-110372.29

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)

<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

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)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) The Tarrance Group</p> <p>Mailing Address 201 N Union St. Ste. 410</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Survey & polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: B.039 Date of Disbursement 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period 36291.00</p>
<p>B. Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 4513</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Credit Card Payment</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21CCP.1 Date of Disbursement 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 6166.18</p>
<p>C. Full Name (Last, First, Middle Initial) Andy Stern</p> <p>Mailing Address 1050 17th Street, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Furniture purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.9 Date of Disbursement 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 421.35</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

42457.18

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)

<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

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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Chicken Out</p> <p>Mailing Address 4866 Massachusetts Avenue, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Mtg. exp. food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.8 Date of Disbursement: 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 238.99</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CMDI</p> <p>Mailing Address 7704 Leesburg Pike</p> <p>City Falls Church State VA Zip Code 22043</p> <p>Purpose of Disbursement Database Management Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.3 Date of Disbursement: 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Custon Scoop</p> <p>Mailing Address 130 Pembroke Road Ste. 150</p> <p>City Concord State NH Zip Code 03301</p> <p>Purpose of Disbursement Press Clippings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.2 Date of Disbursement: 10 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 499.00</p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>0.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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 90 / 105

<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

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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: SC21CCD.1 Date of Disbursement 10 / 08 / 2010
	Mailing Address 942 South Shady Grove Road	Amount of Each Disbursement this Period 193.94
	City Memphis State IL Zip Code 38120	
	Purpose of Disbursement Delivery	[MEMO ITEM]
	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.	Full Name (Last, First, Middle Initial) Intercontinental	Transaction ID: SC21CCD.6 Date of Disbursement 10 / 08 / 2010
	Mailing Address 1401 Pennsylvania Avenue, NW	Amount of Each Disbursement this Period 3499.94
	City Washington State DC Zip Code 20004	
	Purpose of Disbursement Mtg. exp. food & bev.	[MEMO ITEM]
	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:	

C.	Full Name (Last, First, Middle Initial) Sofitel	Transaction ID: SC21CCD.7 Date of Disbursement 10 / 08 / 2010
	Mailing Address 806 15th Street, NW	Amount of Each Disbursement this Period 43.34
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Mtg. exp. food & bev.	[MEMO ITEM]
	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:	

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

<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)
American Crossroads

A. Full Name (Last, First, Middle Initial) Truland Service <hr/> Mailing Address 5701 General Washington Drive Ste. J <hr/> City Alexandria State VA Zip Code 22312 <hr/> Purpose of Disbursement Phone Installation Candidate Name	Transaction ID: SC21CCD.5 Date of Disbursement 10 / 08 / 2010
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) ▼
Category/Type [MEMO ITEM]	

B. Full Name (Last, First, Middle Initial) Washington Courier <hr/> Mailing Address 5520 Cherokee Avenue <hr/> City Alexandria State VA Zip Code 22312 <hr/> Purpose of Disbursement Courier Service Candidate Name	Transaction ID: SC21CCD.4 Date of Disbursement 10 / 08 / 2010
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) ▼
Category/Type [MEMO ITEM]	

C. Full Name (Last, First, Middle Initial) Voter Consumer Research <hr/> Mailing Address 501 C Street, NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Survey & polling Candidate Name	Transaction ID: B.038 Date of Disbursement 10 / 13 / 2010
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Category/Type	

SUBTOTAL of Disbursements This Page (optional) ▶	24900.00
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)

PAGE 92 / 105

<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)
American Crossroads

A. Full Name (Last, First, Middle Initial)
Voter Consumer Research

Mailing Address 501 C Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Survey & polling

Candidate Name

Office Sought: House Senate President

State: District: 00

Disbursement For: Primary General Other (specify) ▼

Transaction ID: B.040
Date of Disbursement 10 / 13 / 2010

Amount of Each Disbursement this Period 33000.00

Category/Type

B. Full Name (Last, First, Middle Initial)
Wilson-Grand Communications

Mailing Address 429 N St. Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement See Schedule E

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: B.049
Date of Disbursement 10 / 01 / 2010

Amount of Each Disbursement this Period -13335.36

Category/Type

Original exp. disclosed on M10

SUBTOTAL of Disbursements This Page (optional) ► 19664.64

TOTAL This Period (last page this line number only) ► 2573414.37

**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 93 / 105

<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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
Republican State Leadership Committee

Transaction ID: 29.001

Date of Disbursement

Mailing Address 1800 Diagonal Road
Ste. 230

^M 1	^M 0	/	^D 0	^D 5	/	^Y 2	^Y 0	^Y 1	^Y 0
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

600000.00

Purpose of Disbursement
Non-federal contribution

Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

600000.00

TOTAL This Period (last page this line number only)

600000.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Date
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Mailing Address
135 Professional Drive
Ste. 104

Amount
73541.45

City State Zip Code
Ponte Vedra Beach FL 32082

Transaction ID: E.021

Purpose of Expenditure
Postage, Printing/Production
Category/Type

Office Sought: House State: AR
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Blanche L. Lincoln

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
73541.45

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

Full Name (Last, First, Middle, Initial) of Payee
Wilson-Grand Communications

Date
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 1 0

Mailing Address
429 N St. Asaph Street

Amount
13335.36

City State Zip Code
Alexandria VA 22314

Transaction ID: E.024

Purpose of Expenditure
TV/Media Production
Category/Type

Office Sought: House State: NV
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Harry Reid

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1047806.02

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

(a) SUBTOTAL of Itemized Independent Expenditures	86876.81
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Date
M M / D D / Y Y Y Y
1 0 / 0 2 / 2 0 1 0

Mailing Address
1780 W Sequoia Vista Circle

Amount
6685.54

City State Zip Code
Salt Lake City UT 84104

Transaction ID: E.020

Purpose of Expenditure
Postage, Printing/Production

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3397911.02

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

Full Name (Last, First, Middle, Initial) of Payee
McCarthy Marcus Hennings, Ltd.

Date
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Mailing Address
1850 M Street, NW
Ste. 235

Amount
14888.00

City State Zip Code
Washington DC 20036

Transaction ID: E.002

Purpose of Expenditure
TV/Media Production

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3397911.02

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

(a) SUBTOTAL of Itemized Independent Expenditures	21573.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
66 Canal Center Plaza
Ste. 555

City State Zip Code
Alexandria VA 22314

Purpose of Expenditure Category/Type
TV/Media Placement

Name of Federal Candidate supported or Opposed by expenditure:
Harry Reid

Calendar Year-To-Date Per Election for Office Sought 1047806.02

Date
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Amount
343544.20

Transaction ID: E.012

Office Sought: House State: NV
 Senate District: _____
 Presidential

Check One: Support Oppose

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

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

Mailing Address
66 Canal Center Plaza
Ste. 555

City State Zip Code
Alexandria VA 22314

Purpose of Expenditure Category/Type
TV/Media Placement

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Calendar Year-To-Date Per Election for Office Sought 3397911.02

Date
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 1 0

Amount
768499.20

Transaction ID: E.013

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

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

(a) SUBTOTAL of Itemized Independent Expenditures	1112043.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER ▼ C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Date
M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Mailing Address
1780 W Sequoia Vista Circle

Amount
12815.84

City State Zip Code
Salt Lake City UT 84104

Transaction ID: E.001

Purpose of Expenditure
Postage, Printing/Production
Category/Type

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennett

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3397911.02

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

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

Date
M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Mailing Address
2800 Shirlington Road
Ste. 901

Amount
5000.00

City State Zip Code
Arlington VA 22206

Transaction ID: E.009

Purpose of Expenditure
Online Advertising
Category/Type

Office Sought: House State: CA
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Barbara Boxer

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 5000.00

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

(a) SUBTOTAL of Itemized Independent Expenditures	17815.84
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
2800 Shirlington Road
Ste. 901

City State Zip Code
Arlington VA 22206

Purpose of Expenditure Category/Type
Online advertising

Name of Federal Candidate supported or Opposed by expenditure:
Nancy Pelosi

Calendar Year-To-Date Per Election for Office Sought 2500.00

Date
M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Amount
2500.00

Transaction ID: E.010

Office Sought: House State: CA
 Senate District: 08
 Presidential

Check One: Support Oppose

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

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

Mailing Address
2800 Shirlington Road
Ste. 901

City State Zip Code
Arlington VA 22206

Purpose of Expenditure Category/Type
Online advertising

Name of Federal Candidate supported or Opposed by expenditure:
Harry Reid

Calendar Year-To-Date Per Election for Office Sought 1047806.02

Date
M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Amount
12500.00

Transaction ID: E.011

Office Sought: House State: NV
 Senate District: _____
 Presidential

Check One: Support Oppose

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

(a) SUBTOTAL of Itemized Independent Expenditures	15000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Olsen & Shuvalov

Mailing Address
1609 Shoal Creek Blvd.
#203

City Austin	State TX	Zip Code 78701
----------------	-------------	-------------------

Purpose of Expenditure Postage	Category/ Type
-----------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Marco Rubio

Calendar Year-To-Date Per Election for Office Sought	513940.79
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Amount
149341.29

Transaction ID: E.022

Office Sought: House State: FL
 Senate District: _____
 Presidential

Check One: Support Oppose

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

Full Name (Last, First, Middle, Initial) of Payee
Olsen & Shuvalov

Mailing Address
1609 Shoal Creek Blvd.
#203

City Austin	State TX	Zip Code 78701
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Purpose of Expenditure Printing/Production	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Marco Rubio

Calendar Year-To-Date Per Election for Office Sought	513940.79
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 0 8 / 2 0 1 0

Amount
97041.42

Transaction ID: E.023

Office Sought: House State: FL
 Senate District: _____
 Presidential

Check One: Support Oppose

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

(a) SUBTOTAL of Itemized Independent Expenditures	246382.71
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy _____ Date M M / D D / Y Y Y Y
Signature 1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Date
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Mailing Address
PO Box 2192

Amount
20882.30

City State Zip Code
Arlington VA 22202

Transaction ID: E.003

Purpose of Expenditure
Phone Calls

Category/Type

Office Sought: House State: FL
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Marco Rubio

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 513940.79

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

48 Hour Notice filed on 10/10/10

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

Date
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Mailing Address
1780 W Sequoia Vista Circle

Amount
23109.54

City State Zip Code
Salt Lake City UT 84104

Transaction ID: E.014

Purpose of Expenditure
Postage, Printing/Production

Category/Type

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 3397911.02

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

(a) SUBTOTAL of Itemized Independent Expenditures	43991.84
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
1780 W Sequoia Vista Circle

City Salt Lake City	State UT	Zip Code 84104
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Purpose of Expenditure Postage, Printing/Production	Category/Type
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Name of Federal Candidate supported or Opposed by expenditure:
Patty Murray

Calendar Year-To-Date Per Election for Office Sought	248843.34
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Amount
8829.86

Transaction ID: E.015

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

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

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

Mailing Address
1780 W Sequoia Vista Circle

City Salt Lake City	State UT	Zip Code 84104
------------------------	-------------	-------------------

Purpose of Expenditure Postage, Printing/Production	Category/Type
--	---------------

Name of Federal Candidate supported or Opposed by expenditure:
Patty Murray

Calendar Year-To-Date Per Election for Office Sought	248843.34
--	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Amount
204703.26

Transaction ID: E.016

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

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

(a) SUBTOTAL of Itemized Independent Expenditures	213533.12
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
1780 W Sequoia Vista Circle

City State Zip Code
Salt Lake City UT 84104

Purpose of Expenditure Category/Type
Postage, Printing/Production

Name of Federal Candidate supported or Opposed by expenditure:
Patty Murray

Calendar Year-To-Date Per Election for Office Sought 248843.34

Date
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 1 0

Amount
24725.62

Transaction ID: E.017

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

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

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

Mailing Address
66 Cancal Center Plaza Ste. 555

City State Zip Code
Alexandria VA 22314

Purpose of Expenditure Category/Type
TV/Media Placement

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Calendar Year-To-Date Per Election for Office Sought 3397911.02

Date
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Amount
770144.20

Transaction ID: E.018

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

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

(a) SUBTOTAL of Itemized Independent Expenditures	794869.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
66 Canal Center Plaza
Ste. 555

City Alexandria	State VA	Zip Code 22314
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Purpose of Expenditure TV/Media Placement	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election for Office Sought	1243818.30
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Date
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 1 0

Amount
505483.60

Transaction ID: E.019

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

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

Full Name (Last, First, Middle, Initial) of Payee
Connection Strategy, LLC

Mailing Address
PO Box 2192

City Arlington	State VA	Zip Code 22202
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Purpose of Expenditure Phone Calls	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Calendar Year-To-Date Per Election for Office Sought	3397911.02
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Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Amount
348.80

Transaction ID: E.004

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

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

48 Hour Notice filed on 10/11/-
2010

(a) SUBTOTAL of Itemized Independent Expenditures	505832.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
McCarthy Marcus Hennings, Ltd.

Mailing Address
1850 M Street, NW
Ste. 235

City State Zip Code
Washington DC 20036

Purpose of Expenditure Category/Type
TV/Media Production

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Calendar Year-To-Date Per Election for Office Sought
3397911.02

Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Amount
14899.00

Transaction ID: E.005

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

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

48 Hour Notice filed on 10/12/-2010

Full Name (Last, First, Middle, Initial) of Payee
McCarthy Marcus Hennings, Ltd.

Mailing Address
1850 M Street, NW
Ste. 235

City State Zip Code
Washington DC 20036

Purpose of Expenditure Category/Type
TV/Media Production

Name of Federal Candidate supported or Opposed by expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election for Office Sought
1243818.30

Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Amount
16370.00

Transaction ID: E.006

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

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

48 Hour Notice filed on 10/12/-2010

(a) SUBTOTAL of Itemized Independent Expenditures	31269.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

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

Mailing Address
1780 W Sequoia Vista Circle

City Salt Lake City	State UT	Zip Code 84104
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Purpose of Expenditure Postage, Printing/Production	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Dino Rossi

Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Amount
5292.30

Transaction ID: E.007

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

48 Hour Notice filed on 10/13/-2010

Calendar Year-To-Date Per Election for Office Sought
248843.34

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

Mailing Address
1780 W Sequoia Vista Circle

City Salt Lake City	State UT	Zip Code 84104
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Purpose of Expenditure Postage, Printing/Production	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Patty Murray

Date
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 1 0

Amount
5292.30

Transaction ID: E.008

Office Sought: House State: WA
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____

48 Hour Notice filed on 10/13/-2010

Calendar Year-To-Date Per Election for Office Sought
248843.34

(a) SUBTOTAL of Itemized Independent Expenditures	10584.60
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	3099773.08

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Margee D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0