



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

Write or Type Committee Name  
American Crossroads

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

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 .....	7886233.31									
(c) Total Receipts (from Line 19) .....	3801657.02	26571463.30								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	11687890.33	26571463.30								
7. Total Disbursements (from Line 31) .....	10591537.15	25475110.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1096353.18	1096353.18								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
American Crossroads

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

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) .....	3581499.00	26217461.52
(ii) Unitemized .....	121571.76	181665.52
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	3703070.76	26399127.04
(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) .....	3703070.76	26399127.04
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) .....	98586.26	172336.26
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)) .....	3801657.02	26571463.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	3801657.02	26571463.30

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	-1451924.76	2371331.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	-1451924.76	2371331.17
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) .....	12042461.91	21652778.95
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 .....	1000.00	1000.00
(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)) .....	1000.00	1000.00
29. Other Disbursements.....	0.00	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))..	10591537.15	25475110.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10591537.15	25475110.12

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 292

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) .....	3703070.76	26399127.04
34. Total Contribution Refunds (from Line 28(d)) .....	1000.00	1000.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3702070.76	26398127.04
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	-1451924.76	2371331.17
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	98586.26	172336.26
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-1550511.02	2198994.91

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 292  
(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) MR. EDWARD ACKERMAN		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
Mailing Address 5956 SHERRY LANE SUITE 1600		Transaction ID: SA11.2469
City DALLAS	State TX	Zip Code 75225-8027
FEC ID number of contributing federal political committee. <b>C</b>		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) ROBERT AIKEN		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address 714 WASHINGTON AVENUE		Transaction ID: SA11.1885
City WILMETTE	State IL	Zip Code 60091-1972
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer BOLDER FOODS	Occupation MANAGER	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) MICHELE ALLEN		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address 2960 DUNE RIDGE PATH		Transaction ID: SA11.1376
City STEVENSVILLE	State MI	Zip Code 49127-9355
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer INTERCARE COMMUNITY HEALTH NETWORK	Occupation DENTIST	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1750.00
<b>TOTAL</b> 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 7 / 292
	(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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL AMINI		Date of Receipt
	Mailing Address 212 BLACKHAWK		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SAN ANTONIO	TX	78232-3606
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SAGE ENERGY COMPANY		Occupation GEOLOGIST	Transaction ID: SA11.3819
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="15000.00"/>	<input type="text" value="15000.00"/>
CONTRIBUTION			

<b>B.</b>	Full Name (Last, First, Middle Initial) TODD ANDREWS		Date of Receipt
	Mailing Address 26932 BOULDER CREST		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	VALENCIA	CA	91381-0626
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PUBLIC STORAGE		Occupation ACCOUNTANT	Transaction ID: SA11.4272
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="750.00"/>	<input type="text" value="500.00"/>
CONTRIBUTION			

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT ANGELICA		Date of Receipt
	Mailing Address 39 COMMUNITY PLAGE		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MORRISTOWN	NJ	07960-5253
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer AT&T COMMUNICATIONS		Occupation EXECUTIVE	Transaction ID: SA11.3544
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="500.00"/>	<input type="text" value="250.00"/>
CONTRIBUTION			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="15750.00"/>
<b>TOTAL</b> 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 8 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) JON ASH	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 37 GOVERNORS ROAD	Transaction ID: SA11.2675
	City State Zip Code HILTON HEAD ISLAND SC 29928-7129	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Aggregate Year-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) THOMAS P. ATKINS	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 1201 EDGECLIFF PLACE APT. 1061	Transaction ID: SA11.4106
	City State Zip Code CINCINNATI OH 45206-2898	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer SELF-EMPLOYED Occupation ATTORNEY Aggregate Year-to-Date 5000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) THOMAS BAKER	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 17408 KUNDE RD	Transaction ID: SA11.971
	City State Zip Code UNION IL 60180-9411	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer RETIRED Occupation RETIRED Aggregate Year-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5500.00
<b>TOTAL</b> 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 9 / 292  
(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)  
KATHY BANG

Mailing Address P.O. BOX 1925

City State Zip Code  
CARMEL CA 93921-1925

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  
10 / 18 / 2010

**Transaction ID:** SA11.2068

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
BARRY BANKER

Mailing Address 1033 CHANCERY LANE

City State Zip Code  
NASHVILLE TN 37215-4523

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
STEWART HOME SCHOOL MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 26 / 2010

**Transaction ID:** SA11.3711

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JOHN BARINEAU

Mailing Address 5509 BRIAR DRIVE

City State Zip Code  
HOUSTON TX 77056-1107

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
RADNEY MANAGEMENT & INVESTMENTS CHAIRMAN & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 28 / 2010

**Transaction ID:** SA11.3821

Amount of Each Receipt this Period  
75.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... 2325.00

**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 10 / 292  
(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)  
ROBERT D. BASHAM

Mailing Address 2202 N WEST SHORE BLVD.  
500

City State Zip Code  
TAMPA FL 33607-5747

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

Name of Employer Occupation  
OUTBACK STEAKHOUSE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

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

Transaction ID: SA11.4096

Amount of Each Receipt this Period  
50000.00

CONTRIBUTION

**B.**

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

Mailing Address 105 SUNRISE DRIVE

City State Zip Code  
WOODSIDE CA 94062-4843

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

Name of Employer Occupation  
PURDY ELECTRONICS CORP ELECTRONICS

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 / 2 2 / 2 0 1 0

Transaction ID: SA11.2642

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.**

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

Mailing Address 654 52ND AVE

City State Zip Code  
GREELEY CO 80634-4434

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

Name of Employer Occupation  
NJL, INC. PILOT

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3712

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **50750.00**

**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 / 292  
(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

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)  
RUDOLF BECKER

Mailing Address 977 WEST HARSDALE RD.

City State Zip Code  
BLOOMFIELD HILLS MI 48302-2416

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

Name of Employer Occupation  
BECKER ORTHOPEDIC EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2010

Transaction ID: SA11.2519

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
BERRIEN H. BECKS

Mailing Address P.O. BOX 10689

City State Zip Code  
DAYTONA BEACH FL 32120-0689

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  
MM / DD / YYYY  
11 / 08 / 2010

Transaction ID: SA11.3965

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
BRANDON R BELOTE III

Mailing Address 461 HONERING TRAIL

City State Zip Code  
ANNAPOLIS MD 21401-6627

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

Name of Employer Occupation  
NORTHROP GRUMMAN CORP COMMUNICATIONS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 14 / 2010

Transaction ID: SA11.980

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 12 / 292  
(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)  
DON BERINGER

Mailing Address 115 HOWARD OAKS DR.

City MACON State GA Zip Code 31210-7316

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

Name of Employer FORSYTH STREET ORTHOPAEDI-CS Occupation ORTHOPAEDIC SURGEON

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 28 / 2010  
Transaction ID: SA11.3823  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. RICHARD BERNSTEIN

Mailing Address 18 ROCKLEDGE ROAD

City RYE State NY Zip Code 10580-1933

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

Name of Employer P&E CAPITAL, IC Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 20 / 2010  
Transaction ID: SA11.2156  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CHARLES BINKLEY

Mailing Address 1975 DISCOVERY DR

City FAIRBANKS State AK Zip Code 99709-4577

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

Name of Employer RIVERBOAT DISCOVERY Occupation CAPTAIN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 22 / 2010  
Transaction ID: SA11.2697  
Amount of Each Receipt this Period: 1000.00  
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 13 / 292  
(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)  
JOHN BIRD

Mailing Address 67 HARVEY DRIVE

City State Zip Code  
SHORT HILLS NJ 07078-1123

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

Name of Employer Occupation  
BANK OF AMERICA MERRILL LYNCH EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2010

**Transaction ID:** SA11.2659

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ROBERT J. BISHOP

Mailing Address 628 WEST ROAD

City State Zip Code  
NEW CANAAN CT 06840-2513

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

Name of Employer Occupation  
IMPALA ASSET MANAGEMENT PRINCIPAL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 20000.00

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2010

**Transaction ID:** SA11.4150

Amount of Each Receipt this Period  
20000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MARCIA BLACKBURN

Mailing Address 1295 LITTLE HARBOUR LANE

City State Zip Code  
VERO BEACH FL 32963-2501

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 / 17 / 2010

**Transaction ID:** SA11.4023

Amount of Each Receipt this Period  
250.00

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: PAGE 14 / 292

(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)  
CHRISTOPHER BLAKE

Mailing Address 28 WAGON WHEEL RD

City State Zip Code  
TAUNTON MA 02780-4368

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

Name of Employer Occupation  
MAXON PRECISION MOTORS PRESIDENT

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 / 2 0 / 2 0 1 0

Transaction ID: SA11.2005

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
PETER BLITZER

Mailing Address 1248 SHADOW LANE

City State Zip Code  
FORT MYERS FL 33901-7733

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 ▼ 2750.00

Date of Receipt

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

Transaction ID: SA11.2613

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**C.**

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

Mailing Address 360 FURMAN ST., #504

City State Zip Code  
BROOKLYN NY 11201-4697

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

Name of Employer Occupation  
INGALLS & SNYDER, LLC ANALYST

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 / 2 2 / 2 0 1 0

Transaction ID: SA11.4277

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

3750.00

**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 15 / 292

(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)  
GEORGE BOWSER

Mailing Address 6 DUNWOODY CIRCLE

City State Zip Code  
HAMPTON VA 23666-1808

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 ▼  
450.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 31 / 2010

Transaction ID: SA11.3551

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
BERNAY BOX

Mailing Address 3520 DARTMOUTH AVENUE

City State Zip Code  
DALLAS TX 75205-3237

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  
10 / 14 / 2010

Transaction ID: SA11.1413

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MARY E. BRADLEY

Mailing Address 339 S PIN HIGH DRIVE

City State Zip Code  
PUEBLO WEST CO 81007-6034

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

Name of Employer CAMBRIDGE HEALTHCARE SERVICES

Receipt For:  
 Primary  General  
 Other (specify) ▼

Occupation

PAYROLL & BENEFITS DIRECTOR

Aggregate Year-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 28 / 2010

Transaction ID: SA11.3079

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 16 / 292  
(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
							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 BRINTON		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 19201 SONOMA HIGHWAY 12 #402		Transaction ID: SA11.3552
City SONOMA	State CA	Zip Code 95476-5413
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer CHARLES CREEK	Occupation VINTNER	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) JACK BRONSTAD		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 6223 PINEVIEW ROAD		Transaction ID: SA11.4093
City DALLAS	State TX	Zip Code 75248-3933
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 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	

**C.**

Full Name (Last, First, Middle Initial) GREG BROWN		Date of Receipt MM / DD / YYYY 10 / 19 / 2010
Mailing Address 11921 GRANDVIEW		Transaction ID: SA11.2073
City COLUMBUS	State IN	Zip Code 47201-8957
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer HOOSIER PATHOLOGY	Occupation PATHOLOGIST	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> 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 17 / 292

(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)  
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 Occupation  
HOOSIER PATHOLOGY PATHOLOGIST

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1500.00

Date of Receipt

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

Transaction ID: SA11.3553

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
TIM BROWNING

Mailing Address 4243 RIVERBIRCH RUN

City State Zip Code  
ZIONSVILLE IN 46077-9282

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

Name of Employer Occupation  
PRINT RESOURCES BUSINESS OWNER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt

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

Transaction ID: SA11.2520

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
WILLIAM H. BROWNE

Mailing Address 350 PARK AVENUE  
9TH FLOOR

City State Zip Code  
NEW YORK NY 10022-6022

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

Name of Employer Occupation  
TWEEDY BROWNE & CO. PARTNER

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

Date of Receipt

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

Transaction ID: SA11.4138

Amount of Each Receipt this Period

5000.00

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 18 / 292  
(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)  
TAD BUCHANAN

Mailing Address 535 SUMMIT AVENUE

City State Zip Code  
MILL VALLEY CA 94941-1032

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

Name of Employer Occupation  
BUCHANAN INVESTMENTS INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

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

Transaction ID: SA11.1430

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JOE BULLARD

Mailing Address 3798 MARSHALL ST SUITE 1A

City State Zip Code  
WHEAT RIDGE CO 80033-6458

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

Name of Employer Occupation  
PUBLICATION DESIGN, INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11.1432

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JOE BULLARD

Mailing Address 3798 MARSHALL ST SUITE 1A

City State Zip Code  
WHEAT RIDGE CO 80033-6458

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

Name of Employer Occupation  
PUBLICATION DESIGN, INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

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

Transaction ID: SA11.3554

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1850.00

**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 / 292  
(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)  
SHEILA BURKE

Mailing Address 425 EL CENTRO ROAD

City Hillsborough State CA Zip Code 94010-6672

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

Name of Employer SELF-EMPLOYED Occupation NON-PROFIT DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 28 / 2010  
**Transaction ID:** SA11.3555  
 Amount of Each Receipt this Period: 1000.00  
**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
GREGORY BURROWS

Mailing Address 1335 JASMINE DR

City Lewisville State TX Zip Code 75077-2141

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 / 16 / 2010  
**Transaction ID:** SA11.1434  
 Amount of Each Receipt this Period: 1000.00  
**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
GARY CAGE

Mailing Address P.O. BOX 4479

City Avon State CO Zip Code 81620-4479

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

Name of Employer SELF-EMPLOYED Occupation DERMATOLOGIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 18 / 2010  
**Transaction ID:** SA11.2007  
 Amount of Each Receipt this Period: 500.00  
**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 20 / 292  
(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) DAN CALLAHAN		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 2225 BOWMAN AVE		Transaction ID: SA11.1444
City TUSTIN	State CA	Zip Code 92782-1035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation INSURANCE BROKER	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) DAN CALLAHAN		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 2225 BOWMAN AVE		Transaction ID: SA11.3558
City TUSTIN	State CA	Zip Code 92782-1035
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation INSURANCE BROKER	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) MR. ERNST CAMENTZ		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 6314 SHADOW WOOD COURT		Transaction ID: SA11.2890
City PROSPECT	State KY	Zip Code 40059-9627
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer CREATION GARDENS	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> 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 / 292  
(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)  
DR. VIRGINIA R. CANNON

Mailing Address 9519 JOHNSON PT. LOOP NE

City State Zip Code  
OLYMPIA WA 98516-9302

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

Name of Employer SELF-EMPLOYED      Occupation PHYSICIAN

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 / 2 1 / 2 0 1 0

**Transaction ID:** SA11.4143

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
LATHAN CAREL

Mailing Address 455 S BLUE GRASS ROAD

City State Zip Code  
WALCOTT IA 52773-9656

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

Name of Employer FIRSTCO, INC      Occupation PRESIDENT

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

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

**Transaction ID:** SA11.1922

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CHRISTOPHER CARPENTER

Mailing Address 229 FRENCH RD

City State Zip Code  
NEWTOWN SQUARE PA 19073-2504

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

Name of Employer THERMO FISHER SCIENTIFIC      Occupation EXECUTIVE

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 / 2 0 / 2 0 1 0

**Transaction ID:** SA11.1923

Amount of Each Receipt this Period  
250.00

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: (check only one)	PAGE 22 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) DON CARTER	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 4757 FRANK LUKE DRIVE	<b>Transaction ID:</b> SA11.4153
	City State Zip Code ADDISON TX 75001-3202	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	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 ▼ 10000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ARCADIO CASILLAS	Date of Receipt MM / DD / YYYY 11 / 03 / 2010
	Mailing Address 124 W 60TH ST., #39N	<b>Transaction ID:</b> SA11.4192
	City State Zip Code NEW YORK NY 10023-7470	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation PREFERRED COMPENSATION PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JACK E. CAENEY	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 11090 TURTLE BEACH ROAD, #A203	<b>Transaction ID:</b> SA11.4165
	City State Zip Code NORTH PALM BEACH FL 33408-3455	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation PANDUIT CORPORATION CHAIRMAN OF THE BOARD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	25000.00
<b>TOTAL</b> 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 23 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MARGARET C. CAVENEY		Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 11090 TURTLE BEACH ROAD, #A203		Transaction ID: SA11.4166
	City NORTH PALM BEACH	State FL	Zip Code 33408-3455
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
	Name of Employer HOMEMAKER		Occupation HOMEMAKER
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00	CONTRIBUTION

<b>B.</b>	Full Name (Last, First, Middle Initial) KATHLEEN CHASE		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 13400 BECKWITH DR. NE		Transaction ID: SA11.3121
	City LOWELL	State MI	Zip Code 49331-8834
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
	Name of Employer RETIRED		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	CONTRIBUTION

<b>C.</b>	Full Name (Last, First, Middle Initial) SHERMAN CHESSLER		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 9326 SHOSHONE AVE		Transaction ID: SA11.3563
	City NORTHRIDGE	State CA	Zip Code 91325-2327
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
	Name of Employer RETIRED		Occupation RETIRED
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5350.00
<b>TOTAL</b> 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 / 292  
(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

<p><b>A.</b> Full Name (Last, First, Middle Initial) PETER CHEUNG</p> <p>Mailing Address 1103 CEDAR ELM LANE</p> <p>City State Zip Code GEORGETOWN TX 78633-1843</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation SCOTT &amp; WHITE PHYSICIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 15 / 2010</p> <p><b>Transaction ID:</b> SA11.1454</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>CONTRIBUTION</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p><b>B.</b> Full Name (Last, First, Middle Initial) JOHN W. CHILDS</p> <p>Mailing Address 165 SAGO PALM ROAD</p> <p>City State Zip Code VERO BEACH FL 32963-3702</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation J.W. CHILDS &amp; ASSOCIATES CHAIRMAN &amp; CEO</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">100000.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 11 / 04 / 2010</p> <p><b>Transaction ID:</b> SA11.4195</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">100000.00</span></p> <p>CONTRIBUTION</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p><b>C.</b> Full Name (Last, First, Middle Initial) JOHN CHOWNING</p> <p>Mailing Address 512 FERN DRIVE</p> <p>City State Zip Code CAMPBELLSVILLE KY 42718-9659</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CAMPBELLSVILLE UNIVERSITY VICE PREISDENT</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">MM / DD / YYYY</span> 10 / 14 / 2010</p> <p><b>Transaction ID:</b> SA11.1457</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>CONTRIBUTION</p>
------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">100750.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 292  
(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) LESTER CLARK		Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 16 / 2010
Mailing Address 3721 LOCKE LN.		<b>Transaction ID:</b> SA11.4243
City HOUSTON	State TX	Zip Code 77027-4005
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">1000.00</span>
Name of Employer PINGORA EXPLORATION CO	Occupation OIL/GAS EXPLORATION	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1000.00</span>	

**B.**

Full Name (Last, First, Middle Initial) JOSEPH CLEMENTS, JR		Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 28 / 2010
Mailing Address P.O. BOX 14477		<b>Transaction ID:</b> SA11.3128
City BATON ROUGE	State LA	Zip Code 70898-4477
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span>
Name of Employer SELF-EMPLOYED	Occupation BURGER KING FRANCHISE OPERATOR	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span>	

**C.**

Full Name (Last, First, Middle Initial) DOTTIE COLLINS		Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 26 / 2010
Mailing Address 1700 WALKER LANE		<b>Transaction ID:</b> SA11.3827
City GREENVILLE	State MS	Zip Code 38701-7360
FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span>		Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span>
Name of Employer COLLINS REAL ESTATE	Occupation OWNER/BROKER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1750.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 26 / 292

(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)  
DAN CORRIGAN

Mailing Address 7150 20TH STREET  
SUITE E

City State Zip Code  
VERO BEACH FL 32966-8805

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

Name of Employer Occupation  
CORRIGAN RANCH BUSINESS 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 5 / 2 0 1 0

Transaction ID: SA11.1474

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
TOM COTHRAN

Mailing Address 5303 1ST AVE S., STE 100

City State Zip Code  
SEATTLE WA 98108-2242

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

Name of Employer Occupation  
PENNON CONSTRUCTION CONTROLLER

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 4 / 2 0 1 0

Transaction ID: SA11.1032

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.**

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

Mailing Address 820 ARROYO CT  
PALO ALTO

City State Zip Code  
CA CA 94306-3734

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

Name of Employer Occupation  
GOOGLE 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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3568

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 27 / 292  
(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)  
JOHN CRISAN  
 Mailing Address 2 BREEZE KNOLL  
 City WESTFIELD State NJ Zip Code 07090-2910  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer JOHNSON & JOHNSON Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00  
 Date of Receipt 10 / 30 / 2010  
**Transaction ID:** SA11.3569  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
HAROLD CROCKER  
 Mailing Address 18411 MARLIN WATERS  
 City HUMBLE State TX Zip Code 77346-8005  
 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 ▼ 450.00  
 Date of Receipt 10 / 23 / 2010  
**Transaction ID:** SA11.2577  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
HAROLD CROCKER  
 Mailing Address 18411 MARLIN WATERS  
 City HUMBLE State TX Zip Code 77346-8005  
 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 ▼ 450.00  
 Date of Receipt 10 / 28 / 2010  
**Transaction ID:** SA11.3570  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 300.00  
**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 / 292  
(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)  
LISA CUMMINGS

Mailing Address P.O. BOX 474

City State Zip Code  
MARLOW OK 73055-0474

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

Name of Employer SELF-EMPLOYED      Occupation ATTORNEY

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	/	2	8	/	2	0	1	0

**Transaction ID:** SA11.3141

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
TIMOTHY CURRO

Mailing Address 366 BROADWAY, 5-C

City State Zip Code  
NEW YORK NY 10013-3909

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

Name of Employer VALUE HOLDINGS      Occupation FINANCIAL ANALYST

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

Date of Receipt  

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

**Transaction ID:** SA11.2680

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JAMES DALEY

Mailing Address 5220 SKY LAKE DRIVE

City State Zip Code  
PLANO TX 75093-7592

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

Name of Employer SELF-EMPLOYED      Occupation CPA

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	7	/	2	0	1	0

**Transaction ID:** SA11.4026

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1550.00**

**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 / 292  
(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)  
MARK DALZELL

Mailing Address 328 S. WESTGATE AVENUE

City State Zip Code  
LOS ANGELES CA 90049-4208

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

Name of Employer  
CAPITAL GROUP OF COMPANIE-S, INC

Occupation  
MONEY 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 4 / 2 0 1 0

Transaction ID: SA11.1483

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.**

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

Mailing Address P.O. BOX 217

City State Zip Code  
OWENSBORO KY 42302-0217

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

Transaction ID: SA11.2699

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
PHIL DANIELL

Mailing Address 3316A SOUTH COBB DRIVE PMB136

City State Zip Code  
SMYRNA GA 30080-4118

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

Transaction ID: SA11.2082

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**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 30 / 292  
(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)  
MR. ROBERT J. DARRETTA

Mailing Address 11 OAKRIDGE COURT

City State Zip Code  
PRINCETON NJ 08540-1232

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  
MM / DD / YYYY  
11 / 01 / 2010

**Transaction ID:** SA11.3013

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 378 CHESTNUT CIRCLE

City State Zip Code  
BLOWING ROCK NC 28605-9319

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

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 20 / 2010

**Transaction ID:** SA11.1992

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JOSHUA DAVIDSON

Mailing Address 3015 CASON

City State Zip Code  
HOUSTON TX 77005-3812

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

Name of Employer Occupation  
BAKER BOTTS L.L.P. ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 16 / 2010

**Transaction ID:** SA11.1486

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 31 / 292  
(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)  
ANNE DAVOS

Mailing Address 11109 PINEYMEETINGHOUSE ROAD

City State Zip Code  
POTOMAC MD 20854-1314

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 ▼  
400.00

Date of Receipt  

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

**Transaction ID:** SA11.1047

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DANIEL DEMARINO

Mailing Address 817 MEADOWSWEET DR

City State Zip Code  
CORTE MADERA CA 94925-1718

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

Name of Employer SELF-EMPLOYED  
Occupation GENERAL CONTRACTOR

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	/	2	0	/	2	0	1	0

**Transaction ID:** SA11.2084

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CLAIBORNE P. DEMING

Mailing Address P.O. BOX 1009

City State Zip Code  
EL DORADO AR 71731-1009

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

Name of Employer SELF-EMPLOYED  
Occupation INVESTOR

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  

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

**Transaction ID:** SA11.4102

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10900.00**

**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 32 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. WILLIAM D. DEMIS	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 16615 HOPE FARM LANE	<b>Transaction ID:</b> SA11.2396
	City State Zip Code CYPRESS TX 77429-4841	Amount of Each Receipt this Period 1150.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer SOUTHWESTERN ENERGY	Occupation GEOLOGIST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) DENISE DILLOW	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 6500 CALENDER RD.	<b>Transaction ID:</b> SA11.2013
	City State Zip Code ARLINGTON TX 76001-5304	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) HAROLD E DITTMER	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 650 BERECUT DRIVE SUITE C	<b>Transaction ID:</b> SA11.1498
	City State Zip Code SACRAMENTO CA 95811-0100	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer WELLHEAD ELECTRIC COMPANY	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6400.00</b>
<b>TOTAL</b> 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 / 292  
(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)  
HAROLD DORAN

Mailing Address 1121 STATE RTE 94 WEST

City State Zip Code  
MURRAY KY 42071-4600

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 ▼ 2000.00

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

**Transaction ID:** SA11.2085

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**B.** 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& FELD,LLP ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 7500.00

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

**Transaction ID:** SA11.3574

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DUANE R DOWNEY

Mailing Address P.O. BOX 590370

City State Zip Code  
NEWTON CENTRE MA 02459-0004

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

Name of Employer Occupation  
BOSTON MEDICAL CENTER CPA

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 5 / 2 0 1 0

**Transaction ID:** SA11.1504

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **4750.00**

**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 34 / 292

(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)  
WILLIAM H. DRACKETT

Mailing Address 614 WOOSTER PIKE

City State Zip Code  
TERRACE PARK OH 45174-1010

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

Name of Employer  
DRACKETT-HARTH CONSTRUCTI-  
ON

Occupation  
DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
8000.00

Date of Receipt

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

Transaction ID: SA11.4100

Amount of Each Receipt this Period

8000.00

CONTRIBUTION

**B.**

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

Mailing Address ONE THE SQUARE

City State Zip Code  
MILTON DE 19968-1300

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

Name of Employer  
SELF-EMPLOYED

Occupation  
ENTREPRENEUR

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 / 2 0 / 2 0 1 0

Transaction ID: SA11.2086

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.**

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

Mailing Address ONE THE SQUARE

City State Zip Code  
MILTON DE 19968-1300

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

Name of Employer  
SELF-EMPLOYED

Occupation  
ENTREPRENEUR

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3576

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

8750.00

**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 35 / 292  
 (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)  
BRIAN DUNCAN  
 Mailing Address 2332 EVERGREEN ST  
 City PAMPA State TX Zip Code 79065-2901  
 Date of Receipt: 10 / 20 / 2010  
 Transaction ID: SA11.2016  
 Amount of Each Receipt this Period: 100.00  
 CONTRIBUTION  
 Name of Employer: SELF-EMPLOYED Occupation: INSURANCE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 400.00

**B.** Full Name (Last, First, Middle Initial)  
BRIAN DUNCAN  
 Mailing Address 2332 EVERGREEN ST  
 City PAMPA State TX Zip Code 79065-2901  
 Date of Receipt: 10 / 22 / 2010  
 Transaction ID: SA11.2700  
 Amount of Each Receipt this Period: 100.00  
 CONTRIBUTION  
 Name of Employer: SELF-EMPLOYED Occupation: INSURANCE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 400.00

**C.** Full Name (Last, First, Middle Initial)  
BRIAN DUNCAN  
 Mailing Address 2332 EVERGREEN ST  
 City PAMPA State TX Zip Code 79065-2901  
 Date of Receipt: 10 / 28 / 2010  
 Transaction ID: SA11.3581  
 Amount of Each Receipt this Period: 100.00  
 CONTRIBUTION  
 Name of Employer: SELF-EMPLOYED Occupation: INSURANCE  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date: 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... **300.00**  
**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 / 292  
(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)  
JOHN DUNCAN  
Mailing Address 33 LANDING HILL  
City EAST HADDAM State CT Zip Code 06423-1314  
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 / 16 / 2010  
Transaction ID: SA11.1063  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ANNIS JANE DURAND  
Mailing Address 1 SUMMER SKY CIRCLE  
City RANCHO MIRAGE State CA Zip Code 92270-1979  
FEC ID number of contributing federal political committee. **C**  
Name of Employer DESERT CITIES INVESTMENTS Occupation ACCOUNTANT  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 10 / 28 / 2010  
Transaction ID: SA11.3171  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JAMES DURKIN  
Mailing Address 2423 SARANAC LANE  
City GLENVIEW State IL Zip Code 60026-1099  
FEC ID number of contributing federal political committee. **C**  
Name of Employer AJ&G CO Occupation SALES  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 28 / 2010  
Transaction ID: SA11.3172  
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 37 / 292

(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)  
JAROSLAW DZWINYK

Mailing Address 5912 N KILPATRICK AVE

City State Zip Code  
CHICAGO IL 60646-5824

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

Name of Employer  
BUFFALOW GROVE ORTHOPEDIC ASSOCIATES

Occupation  
PHYSICIAN

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 / 2 5 / 2 0 1 0

Transaction ID: SA11.2617

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
CHRIS EDWARDS

Mailing Address 670 BOULEVARD

City State Zip Code  
WESTFIELD NJ 07090-3210

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

Name of Employer  
AUDUBON COMMUNITIES

Occupation  
REAL ESTATE

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 9 / 2 0 1 0

Transaction ID: SA11.2017

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
CHRISTOPHER F. EGAN

Mailing Address 116 FLANDERS ROAD  
STE. 2000

City State Zip Code  
WESTBOROUGH MA 01581-1072

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

Name of Employer  
CARRUTH CAPITAL LLC

Occupation  
PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

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

Transaction ID: SA11.4167

Amount of Each Receipt this Period

10000.00

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 38 / 292  
(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)  
STEPHEN EGBERT

Mailing Address 2941 BISHOP STREET

City State Zip Code  
LAWRENCE KS 66046-6108

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

Name of Employer Occupation  
UNIVERSITY OF KANSAS PROFESSOR

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 4 / 2 0 1 0

**Transaction ID:** SA11.1511

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. PHILIP ENGLISH

Mailing Address 7350 BRIGHTSIDE ROAD

City State Zip Code  
BALTIMORE MD 21212-1011

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

Name of Employer Occupation  
BROVENTURE COMPANY INC. PRESIDENT

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 / 2 0 / 2 0 1 0

**Transaction ID:** SA11.2183

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SUSAN EVANS

Mailing Address 3924 UPOLO LANE

City State Zip Code  
NAPLES FL 34119-7509

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

Name of Employer Occupation  
SELF-EMPLOYED 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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3178

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 39 / 292

(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)  
JOHN FALLAT

Mailing Address 999 FIFTH AVENUE  
SUITE 590

City State Zip Code  
SAN RAFAEL CA 94901-2994

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

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 6 / 2 0 1 0

Transaction ID: SA11.1521

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.**

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 ▼ 1250.00

Date of Receipt

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

Transaction ID: SA11.3586

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
ALLAN FEINBERG

Mailing Address 16311 VENTURA BLVD.  
SUITE 610

City State Zip Code  
ENCINO CA 91436-4379

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

Name of Employer Occupation  
SELF-EMPLOYED 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 / 2 1 / 2 0 1 0

Transaction ID: SA11.2683

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 40 / 292  
(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) DAVID FEINBERG		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address DAVID FEINBERG 993 5TH AVE		Transaction ID: SA11.2092
City NEW YORK	State NY	Zip Code 10028-0105
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer SELF-EMPLOYED	Occupation REAL ESTATE	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

**B.**

Full Name (Last, First, Middle Initial) MARCIA FEINSTEIN		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 808 DUKE STREET		Transaction ID: SA11.3182
City ALEXANDRIA	State VA	Zip Code 22314-3624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer SELF-EMPLOYED	Occupation ANTIQUES DEALER	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) MARCIA FEINSTEIN		Date of Receipt MM / DD / YYYY 10 / 16 / 2010
Mailing Address 808 DUKE STREET		Transaction ID: SA11.4234
City ALEXANDRIA	State VA	Zip Code 22314-3624
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer SELF-EMPLOYED	Occupation ANTIQUES DEALER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	25300.00
<b>TOTAL</b> 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 41 / 292  
(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)  
FRED FERREIRA

Mailing Address PO BOX2540

City State Zip Code  
CAREFREE AZ 85377-2540

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 ▼ 4000.00

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

**Transaction ID:** SA11.1926

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
FRED FERREIRA

Mailing Address PO BOX2540

City State Zip Code  
CAREFREE AZ 85377-2540

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 ▼ 4000.00

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

**Transaction ID:** SA11.3588

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
FRED FERREIRA

Mailing Address PO BOX2540

City State Zip Code  
CAREFREE AZ 85377-2540

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 ▼ 4000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 1 0

**Transaction ID:** SA11.4029

Amount of Each Receipt this Period  
2000.00

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 42 / 292  
(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)  
LUKE FIGHTHORN III

Mailing Address 430 COCONUT PALM RD

City State Zip Code  
VERO BEACH FL 32963-3709

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 / 2 6 / 2 0 1 0

**Transaction ID:** SA11.3837

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JEFFREY FILIPEK

Mailing Address 3754 COLLIERS DRIVE

City State Zip Code  
EDGEWATER MD 21037-3410

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

Name of Employer Occupation  
WENDEROTH ATTORNEY

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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3719

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
LAWRENCE FINCH

Mailing Address P.O. BOX 210545

City State Zip Code  
SAN FRANCISCO CA 94121-0545

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

Name of Employer Occupation  
SELF-EMPLOYED VENTURE CAPITALIST

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 8 / 2 0 1 0

**Transaction ID:** SA11.1987

Amount of Each Receipt this Period  
1000.00

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 43 / 292  
(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)  
TULL FLOREY

Mailing Address 6003 GREEN TREE RD

City HOUSTON State TX Zip Code 77057-1417

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

Name of Employer BAKER BOTTS LLP Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt 10 / 28 / 2010  
Transaction ID: SA11.3590  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DAN FLOURNOY

Mailing Address 6014 DEERWOOD

City HOUSTON State TX Zip Code 77057-1426

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 / 28 / 2010  
Transaction ID: SA11.3839  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JOHN FOGARTY

Mailing Address 23 SIVER STREET

City SIDNEY State NY Zip Code 13838-1624

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 / 25 / 2010  
Transaction ID: SA11.2618  
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: (check only one)	PAGE 44 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) FRANCIS FOLEY		Date of Receipt
	Mailing Address 447 A AVE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CORONADO	CA	92118-1915
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer UNITED STATES NAVY		Occupation NAVY OFFICER	Transaction ID: SA11.2021
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"/>	Amount of Each Receipt this Period <input type="text" value="250.00"/>
CONTRIBUTION			

<b>B.</b>	Full Name (Last, First, Middle Initial) BRIAN R. FOLLETT		Date of Receipt
	Mailing Address BOX 01717035		<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SIOUX FALLS	SD	57186-0001
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HEROIC MEDIA		Occupation CEO	Transaction ID: SA11.3720
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	Amount of Each Receipt this Period <input type="text" value="10000.00"/>
CONTRIBUTION			

<b>C.</b>	Full Name (Last, First, Middle Initial) E H FRANK		Date of Receipt
	Mailing Address 5773 WOODWAY, BOX 403		<input type="text" value="10"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HOUSTON	TX	77057-1501
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INDEMCO LP		Occupation EXECUTIVE	Transaction ID: SA11.3840
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"/>	Amount of Each Receipt this Period <input type="text" value="250.00"/>
CONTRIBUTION			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="10500.00"/>
<b>TOTAL</b> 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 45 / 292  
(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)  
LARRY FRANKLIN

Mailing Address 9601 MCALLISTER FREEWAY  
SUITE 610

City State Zip Code  
SAN ANTONIO TX 78216-4632

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

Name of Employer Occupation  
HARTE-HANKS, INC. CHAIRMAN &CEO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

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

**Transaction ID:** SA11.2684

Amount of Each Receipt this Period  
15000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ROBERT FRESE

Mailing Address 29 FALCONE CIR

City State Zip Code  
HAMPTON NH 03842-1156

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 / 1 5 / 2 0 1 0

**Transaction ID:** SA11.1541

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
AMIR FRIEDMAN, M.D.

Mailing Address 4687 CAMINO DEL SOL

City State Zip Code  
CALABASAS CA 91302-3837

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

Name of Employer Occupation  
SELF-EMPLOYED SURGEON

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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3195

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **15500.00**

**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 / 292  
(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)  
MR. BARRY FRIEDBERG

Mailing Address 134 E. 71ST STREET

City State Zip Code  
NEW YORK NY 10021-5011

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

Name of Employer Occupation  
FRIEDBERG MILSTEIN INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 27 / 2010

Transaction ID: SA11.2792

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
DR. MICHAEL FUTRELL

Mailing Address 10875 BELLE COUR WAY

City State Zip Code  
SHREVEPORT LA 71106-7771

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

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
11 / 01 / 2010

Transaction ID: SA11.2994

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.**

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

Mailing Address 4515 WILLARD AVE.  
APT. S2318

City State Zip Code  
CHEVY CHASE MD 20815-3631

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

Name of Employer Occupation  
TRIDENT SYSTEMS INC ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 22 / 2010

Transaction ID: SA11.2554

Amount of Each Receipt this Period  
500.00

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 47 / 292
	(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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) JAMES GAREAU		Date of Receipt
	Mailing Address 482 WASHINGTON ST		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	WELLESLEY	MA	02482-5909
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.1928
Name of Employer PHYSIK INSTRUMENTE		Occupation SALES MANAGER	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 ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>
			CONTRIBUTION

<b>B.</b>	Full Name (Last, First, Middle Initial) STEVEN GARFINKLE		Date of Receipt
	Mailing Address 5 ARLINGTON STREET		<input type="text" value="10"/> / <input type="text" value="14"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BOSTON	MA	02116-3414
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.1545
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 ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>
			CONTRIBUTION

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN GARTON		Date of Receipt
	Mailing Address 7730 SILVER BELL DRIVE		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SARASOTA	FL	34241-6412
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.2526
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 ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>
			CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="750.00"/>
<b>TOTAL</b> 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 48 / 292  
(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)  
BRUCE GHRIST

Mailing Address 2805 UNIVERSITY TER NW

City State Zip Code  
WASHINGTON DC 20016-3458

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

Name of Employer Occupation  
ROSETTA STONE ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2100.00

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

**Transaction ID:** SA11.3593

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 42 DIAMOND DRIVE

City State Zip Code  
DANVILLE CA 94526-2425

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

Name of Employer Occupation  
JOHN GIDDENS, MD, INC. PHYSICIAN

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 / 2 3 / 2 0 1 0

**Transaction ID:** SA11.2650

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 609 SOUTH WARSON RD

City State Zip Code  
ST. LOUIS MO 63124-1254

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

Name of Employer Occupation  
LANDSCAPE BRANDS, INC. CEO

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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3206

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 850.00

**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 / 292  
(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)  
JAMES GILLEY  
 Mailing Address 45 AVENIDA SORRENTO  
 City Henderson State NV Zip Code 89011-3205  
 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 / 18 / 2010  
**Transaction ID: SA11.1929**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
S. MALCOLM GILLIS  
 Mailing Address 3202 N PEMBERTON CIRCLE DRIVE  
 City Houston State TX Zip Code 77025-4324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SERVICE CORPORATION INTER-NATIONAL Occupation EXECUTIVE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00  
 Date of Receipt 10 / 18 / 2010  
**Transaction ID: SA11.4099**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DAVID GOOD  
 Mailing Address 2344 SHACKLEFORD TRAIL  
 City Grand Prairie State TX Zip Code 75052-8597  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANEW BUISNESS SOLUTIONS Occupation VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00  
 Date of Receipt 10 / 15 / 2010  
**Transaction ID: SA11.1102**  
 Amount of Each Receipt this Period 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1350.00  
**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 / 292  
(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)  
DAVID GOOD

Mailing Address 2344 SHACKLEFORD TRAIL

City State Zip Code  
GRAND PRAIRIE TX 75052-8597

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

Name of Employer Occupation  
ANEW BUISNESS SOLUTIONS VP

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 27 / 2010

**Transaction ID:** SA11.3725

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
OLIVER GRACE

Mailing Address 265 SUNRISE AVENUE  
SUITE 204/A

City State Zip Code  
PALM BEACH FL 33480-3882

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

Name of Employer Occupation  
DEVELOPMENT SERVICES LLC MEMBER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2010

**Transaction ID:** SA11.925

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MARGARET GRAMANN

Mailing Address 10266 SYLVIAN DR

City State Zip Code  
DUBLIN OH 43017-8715

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  
10 / 14 / 2010

**Transaction ID:** SA11.1560

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 / 292  
(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)  
MARGARET GRAMANN

Mailing Address 10266 SYLVIAN DR

City State Zip Code  
DUBLIN OH 43017-8715

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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3597

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
KATHI GRANT

Mailing Address 706 ROSLYN TERRACE

City State Zip Code  
EVANSTON IL 60201-1722

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

**Transaction ID:** SA11.3726

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
RAYMOND GRENIER

Mailing Address 579 MAIN ST.

City State Zip Code  
BOLTON MA 01740-1360

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

Name of Employer Occupation  
ANDOVER CAPITAL CO CEO

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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3598

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 52 / 292

(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)  
ANNE D. GRIFFIN

Mailing Address 800 N MICHIGAN AVENUE, 67PH

City State Zip Code  
CHICAGO IL 60611-2105

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

Name of Employer Occupation  
ARAGON GLOBAL MANAGEMENT PORTFOLIO MANAGER

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 / 2 5 / 2 0 1 0

Transaction ID: SA11.4163

Amount of Each Receipt this Period

250000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
KENNETH C. GRIFFIN

Mailing Address 800 N MICHIGAN AVENUE, 67PH

City State Zip Code  
CHICAGO IL 60611-2105

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

Name of Employer Occupation  
CITADEL INVESTMENT GROUP CEO

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 / 2 5 / 2 0 1 0

Transaction ID: SA11.4164

Amount of Each Receipt this Period

250000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
MICHAEL GRIMES

Mailing Address 320 W SANTA INEZ AVE.

City State Zip Code  
HILLSBOROUGH CA 94010-6864

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

Name of Employer Occupation  
MORGAN STANLEY BANKER

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

Date of Receipt

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

Transaction ID: SA11.4224

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

510000.00

**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 / 292  
(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)  
WINDI GRIMES

Mailing Address 3310 WEST MAIN STREET

City HOUSTON State TX Zip Code 77098-1822

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 ▼ 5000.00

Date of Receipt: 10 / 18 / 2010  
Transaction ID: SA11.4225  
Amount of Each Receipt this Period: 5000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JERRY GRUNDHOFER

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: INFORMATION REQUESTED PER BEST EFFORTS Occupation: INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 12400.00

Date of Receipt: 10 / 25 / 2010  
Transaction ID: SA11.2485  
Amount of Each Receipt this Period: 5000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DIANNE HAGAR

Mailing Address 3610 RIDGE POINTE DRIVE

City GENEVA State IL Zip Code 60134-5103

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 / 21 / 2010  
Transaction ID: SA11.4145  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10250.00**

**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 54 / 292  
(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)  
MR. JOHN F. HALLAM

Mailing Address 11204 OLD CLUB ROAD

City State Zip Code  
ROCKVILLE MD 20852-4535

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 / 2 0 / 2 0 1 0

Transaction ID: SA11.2202

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 141 W. JACKSON BLVD  
SUITE 2020A

City State Zip Code  
CHICAGO IL 60604-3156

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

Name of Employer Occupation  
QLTRADING FINANCE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

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

Transaction ID: SA11.3844

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. J. KERN HAMILTON

Mailing Address 800 BLOSSOM HILL ROAD  
UNIT E324

City State Zip Code  
LOS GATOS CA 95032-3568

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

Name of Employer Occupation  
JONES-HAMILTON CO 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 / 2 5 / 2 0 1 0

Transaction ID: SA11.2311

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10500.00

**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 55 / 292  
(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)  
JENNIFER HAMILTON

Mailing Address 4453 SENTINEL POST ROAD

City ATLANTA State GA Zip Code 30327-3911

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

Name of Employer SELF-EMPLOYED Occupation BUSINESS OWNER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 17 / 2010  
**Transaction ID:** SA11.4232  
 Amount of Each Receipt this Period: 250.00  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
JON HAMMES

Mailing Address 7224 W. HIGHLAND ROAD

City MEQUON State WI Zip Code 53092-1002

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

Name of Employer HAMMES COMPANY Occupation MANAGING PARTNER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 29 / 2010  
**Transaction ID:** SA11.3845  
 Amount of Each Receipt this Period: 10000.00  
**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
PATRICK HANRAHAN

Mailing Address 1807 SANDALWOOD LANE

City NEWPORT BEACH State CA Zip Code 92660-4332

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

Name of Employer THE CARSON COMPANIES Occupation REAL ESTATE MANAGEMENT

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 28 / 2010  
**Transaction ID:** SA11.3222  
 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 56 / 292  
(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)  
FRANCES DORCHESTER HARRELL

Mailing Address 2660 NORTH MAGNOLIA AVENUE

City PENSACOLA State FL Zip Code 32503-4945

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 ▼ 500.00

Date of Receipt 11 / 03 / 2010

Transaction ID: SA11.4194

Amount of Each Receipt this Period 500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ROBERT HAWK

Mailing Address 18424 ORIENTAL OAK COURT

City NOBLESVILLE State IN Zip Code 46062-7577

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

Name of Employer WEAVER POPCORN COMPANY, INC. Occupation VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 21 / 2010

Transaction ID: SA11.2687

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
THOMAS HAYES

Mailing Address 5 COMSTOCK PLACE

City CHARLESTON State WV Zip Code 25314-1207

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2010

Transaction ID: SA11.3229

Amount of Each Receipt this Period 250.00

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: (check only one)	PAGE 57 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) FREDERICK HAYNES	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 40 GROVE ST SUITE 380	Transaction ID: SA11.1577
	City WELLESLEY State MA Zip Code 02482-7711	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer LIVINGSTON & HAYNES P.C. Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) FREDERICK HAYNES	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 40 GROVE ST SUITE 380	Transaction ID: SA11.3610
	City WELLESLEY State MA Zip Code 02482-7711	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer LIVINGSTON & HAYNES P.C. Occupation CPA Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN T. HAZEL, JR.	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 6254 HUNTLEY ROAD	Transaction ID: SA11.4109
	City BROAD RUN State VA Zip Code 20137-1830	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer ANGLER COMPANIES Occupation EXECUTIVE Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> 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 58 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) JAMES HEARD	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 1015 WILSON GLEN DR.	Transaction ID: SA11.1578
	City State Zip Code ROSWELL GA 30075-2753	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer WINDHAM BRANNON FINANCIAL GROUP	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) KEVIN HERBERT	Date of Receipt MM / DD / YYYY 10 / 24 / 2010
	Mailing Address 7012 SECREST COURT	Transaction ID: SA11.2470
	City State Zip Code ARVADA CO 80007-7652	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer HAIN-CELESTIAL	Occupation SALES	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) CARMEN HERNANDEZ	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 5 SHIPPEN STREET FIRST FLOOR	Transaction ID: SA11.3612
	City State Zip Code WEEHAWKEN NJ 07086-5619	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
Name of Employer HARRIS BEACH PLLC	Occupation ADMINISTRATIVE ASSISTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5500.00
<b>TOTAL</b> 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 / 292  
(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)  
DAVID G. HERRO

Mailing Address 65 E GOETHE

City State Zip Code  
CHICAGO IL 60610-2628

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

Name of Employer Occupation  
HARRIS ASSOCIATES LP EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 10 / 18 / 2010  
Transaction ID: SA11.4115  
Amount of Each Receipt this Period: 10000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
BILL HILL

Mailing Address 3520 MCFARLIN

City State Zip Code  
DALLAS TX 75205-1830

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

Name of Employer Occupation  
SELF-EMPLOYED ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1100.00

Date of Receipt: 10 / 28 / 2010  
Transaction ID: SA11.3614  
Amount of Each Receipt this Period: 100.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JUDY HOFFMAN

Mailing Address 303 SKYLARK WAY

City State Zip Code  
BOULDER CO 80303-4635

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

Name of Employer Occupation  
JLH INTERIORS INTERIOR DESIGN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010  
Transaction ID: SA11.2621  
Amount of Each Receipt this Period: 500.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10600.00

**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 / 292

(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)  
WILLIAM HOLCOMB

Mailing Address 106 VIEW POINT CIRCLE

City State Zip Code  
CULLMAN AL 35057-6983

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

Name of Employer Occupation  
WE HOLCOMB MD & ASSOC, PC PHYSICIAN

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 4 / 2 0 1 0

Transaction ID: SA11.1591

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
JIM HOLLINGSHEAD

Mailing Address 14177 CAMINITO VISTANA

City State Zip Code  
SAN DIEGO CA 92130-3722

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

Name of Employer Occupation  
RESMED 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 7 / 2 0 1 0

Transaction ID: SA11.4034

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
KEVIN HOLMGREN

Mailing Address 2308 FARRINGTON LANE

City State Zip Code  
HURST TX 76054-2752

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

Name of Employer Occupation  
PRUDENTIAL CEO

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 4 / 2 0 1 0

Transaction ID: SA11.1593

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**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 / 292  
(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)  
HOWARD HOLSENBECK

Mailing Address 8191 SOUTHWEST FREEWAY #119

City HOUSTON State TX Zip Code 77074-1700

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 11 / 10 / 2010  
**Transaction ID:** SA11.4197  
 Amount of Each Receipt this Period: 250.00  
**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
MR. JOHN J. HOPKINSON

Mailing Address 7901 ARDMORE AVENUE

City WYNDMOOR State PA Zip Code 19038-8570

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: 11 / 01 / 2010  
**Transaction ID:** SA11.3016  
 Amount of Each Receipt this Period: 500.00  
**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
RICHARD M HOROWITZ

Mailing Address 9301 WILSHIRE BLVD STE 613

City BEVERLY HILLS State CA Zip Code 90210-6172

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

Name of Employer MANAGEMENT BROKERS, INC Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt: 10 / 25 / 2010  
**Transaction ID:** SA11.2622  
 Amount of Each Receipt this Period: 5000.00  
**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 62 / 292

(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)  
FREDERICK HOWARTH

Mailing Address 6077 BRISTOL PARKWAY

City State Zip Code  
CULVER CITY CA 90230-6627

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

Name of Employer Occupation  
SELF-EMPLOYED INSURANCE AGENT

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 / 2 4 / 2 0 1 0

Transaction ID: SA11.2592

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.**

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

Mailing Address P.O. BOX 418

City State Zip Code  
SOUTH HOUSTON TX 77587-0418

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

Name of Employer Occupation  
HOUSTON PLATING & COATINGS 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 8 / 2 0 1 0

Transaction ID: SA11.2026

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
ALLAN HUBBARD

Mailing Address 5600 SUNSET LANE

City State Zip Code  
INDIANAPOLIS IN 46228-1446

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

Name of Employer Occupation  
E&A INDUSTRIES, INC. OWNER

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

Date of Receipt

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

Transaction ID: SA11.1939

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

11500.00

**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 63 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) JAMES HUESING		Date of Receipt
	Mailing Address 7452 JAGER COURT		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	CONCINNATI	OH	45230-4344
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF EMPLOYED		Occupation DEVELOPER	Transaction ID: SA11.1993
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="2000.00"/>	<input type="text" value="1000.00"/>
CONTRIBUTION			

<b>B.</b>	Full Name (Last, First, Middle Initial) B. WAYNE HUGHES		Date of Receipt
	Mailing Address 884 IRON WORKS PIKE		<input type="text" value="10"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LEXINGTON	KY	40511-9410
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer PUBLIC STORAGE INC.		Occupation CHAIRMAN	Transaction ID: SA11.4087
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="3250000.00"/>	<input type="text" value="950000.00"/>
CONTRIBUTION			

<b>C.</b>	Full Name (Last, First, Middle Initial) DOUGLAS H. HUNT		Date of Receipt
	Mailing Address 1601 ELM STREET STE. 3400		<input type="text" value="10"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	DALLAS	TX	75201-7201
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	Transaction ID: SA11.4175
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="10000.00"/>	<input type="text" value="10000.00"/>
CONTRIBUTION			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="961000.00"/>
<b>TOTAL</b> 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 64 / 292  
(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)  
M G HYDE

Mailing Address 2029 HARRIS RD.

City State Zip Code  
CHARLOTTE NC 28211-2151

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

Name of Employer Occupation  
WELLS FARGO BANKING

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 / 2 0 / 2 0 1 0

**Transaction ID:** SA11.1908

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MARC IVERSON

Mailing Address 6037 SHARON RD

City State Zip Code  
CHARLOTTE NC 28210-6827

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

Name of Employer Occupation  
DISABLED DISABLED

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 5 / 2 0 1 0

**Transaction ID:** SA11.939

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
PAUL JACROUX

Mailing Address 925 5TH AVE.  
D-1

City State Zip Code  
KIRKLAND WA 98033-3919

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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3619

Amount of Each Receipt this Period  
250.00

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 65 / 292  
(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)  
ED JAMES

Mailing Address 3003 W. ALABAMA

City HOUSTON State TX Zip Code 77098-2001

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

Name of Employer MRH RETAIL, INC. Occupation COMMERCIAL REAL ESTATE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 18 / 2010  
Transaction ID: SA11.1988  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
GEORGE JENKINS

Mailing Address 467 BELROSE LANE

City ST. DAVIDS State PA Zip Code 19087-4418

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

Name of Employer MERRITT CAPITAL CORPORATION Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2195.00

Date of Receipt 10 / 14 / 2010  
Transaction ID: SA11.4258  
Amount of Each Receipt this Period 2195.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MITCH JENKINS

Mailing Address P.O. BOX 10547

City LAHAINA State HI Zip Code 96761-0547

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 / 28 / 2010  
Transaction ID: SA11.3265  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 2945.00

**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 / 292

(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)  
MARK JOHNSON

Mailing Address 568 9TH STREET SOUTH SUITE 148

City State Zip Code  
NAPLES FL 34102-6620

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) ▼ 1500.00

Date of Receipt

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

Transaction ID: SA11.1152

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.**

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

Mailing Address 568 9TH STREET SOUTH SUITE 148

City State Zip Code  
NAPLES FL 34102-6620

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) ▼ 1500.00

Date of Receipt

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

Transaction ID: SA11.3623

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.**

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

Mailing Address 5312 20TH ST. N.

City State Zip Code  
ARLINGTON VA 22205-3019

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

Name of Employer Occupation  
WINSTON & STRAWN ATTORNEY

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 8 / 2 0 1 0

Transaction ID: SA11.2028

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**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 67 / 292  
(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)  
BRICE C. JONES

Mailing Address P.O. BOX 971

City State Zip Code  
ROSS CA 94957-0971

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

Name of Employer Occupation  
SELF-EMPLOYED MANAGER

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 / 2 9 / 2 0 1 0

**Transaction ID:** SA11.4188

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
LEE KEARNEY

Mailing Address 7611 SE EVERGREEN HIGHWAY

City State Zip Code  
VANCOUVER WA 98664-1721

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 ▼ 2000.00

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

**Transaction ID:** SA11.4183

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JOHN KEEFE

Mailing Address 4421 WARREN ST. NW

City State Zip Code  
WASHINGTON DC 20016-2439

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

Name of Employer Occupation  
ARAXAS CORP CONSULTANT

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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3734

Amount of Each Receipt this Period  
250.00

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: (check only one)	PAGE 68 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) DAVID KELSEY	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 10 CASTLE BROOKE RD	<b>Transaction ID:</b> SA11.2029
	City State Zip Code WEST HARRISON NY 10604-1523	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation HOMEMAKER HOMEMAKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MATTHEW KERFOOT	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 333 E 79TH STREET 10Z	<b>Transaction ID:</b> SA11.3735
	City State Zip Code NEW YORK NY 10075-0956	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation DECHERT ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) BEN KERSHAW	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 49 SHARON RD.	<b>Transaction ID:</b> SA11.1896
	City State Zip Code WINDHAM NH 03087-2212	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1250.00
<b>TOTAL</b> 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 / 292

(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)  
JOHN KILLIAN

Mailing Address 314 STERRETT AVE

City State Zip Code  
BIRMINGHAM AL 35209-5135

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

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

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 / 2 9 / 2 0 1 0

Transaction ID: SA11.3278

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B.**

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

Date of Receipt

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

Transaction ID: SA11.3736

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
LAWRENCE KIRSHNER

Mailing Address 14 HIGHLAND PARK PL.

City State Zip Code  
RYE NY 10580-1736

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

Name of Employer Occupation  
FRENKEL & CO. INSURANCE BROKER

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3850

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**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 70 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) ROGER KLEIN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 63 BEETHOVEN AVE	Transaction ID: SA11.1924
	City State Zip Code NEWTON MA 02468-1732	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation TREND SOFTWARE ATTORNEY, INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN KRINGS	Date of Receipt MM / DD / YYYY 10 / 17 / 2010
	Mailing Address 4408 LONG CHAMP DR. #16	Transaction ID: SA11.4036
	City State Zip Code AUSTIN TX 78746-1185	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation KRINGS CORPORATION CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ANDREW LANIAK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 83 SYCAMORE RIDGE	Transaction ID: SA11.3853
	City State Zip Code HONEOYE FALLS NY 14472-9377	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1500.00
<b>TOTAL</b> 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 / 292  
(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)  
CHARLES LARSON

Mailing Address 1816 WILDBERRY DR  
UNIT C

City State Zip Code  
GLENVIEW IL 60025-1788

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3296

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
STALLWORTH LARSON

Mailing Address 6845 NORTH OCEAN BOULEVARD  
MEWS SOUTH 5

City State Zip Code  
OCEAN RIDGE FL 33435-3334

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 ▼  
350.00

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

Transaction ID: SA11.1631

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
PATRICK F. LATTERELL

Mailing Address 98 MAIN STREET #506

City State Zip Code  
TIBURON CA 94920-2517

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 ▼  
10000.00

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

Transaction ID: SA11.4176

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10500.00**

**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 / 292  
(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)  
VIRGINIA B. LAZENBY

Mailing Address 1201 BELLE MEAD BLVD.

City State Zip Code  
NASHVILLE TN 37205-4507

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

Name of Employer Occupation  
BRETAGNE LLC CHAIRMAN & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 18 / 2010

Transaction ID: SA11.4101

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. KARL O. LEE

Mailing Address 1919 12TH AVENUE SE

City State Zip Code  
ABERDEEN SD 57401-7320

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:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 25 / 2010

Transaction ID: SA11.2423

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
JOHN T. LEIGH

Mailing Address 199 MOHAWK DR.

City State Zip Code  
PITTSBURGH PA 15228-1564

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

Name of Employer Occupation  
SELF-EMPLOYED COURIER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1750.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 19 / 2010

Transaction ID: SA11.1911

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 11000.00

**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 73 / 292  
(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)  
JOHN T. LEIGH  
Mailing Address 199 MOHAWK DR.  
City State Zip Code  
PITTSBURGH PA 15228-1564  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
SELF-EMPLOYED COURIER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1750.00  
Date of Receipt: 10 / 28 / 2010  
Transaction ID: SA11.3634  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MARK LEVEY  
Mailing Address 574 W HAWTHORNE PL  
City State Zip Code  
CHICAGO IL 60657-2923  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
LOTSOFF CAPITAL INVESTMENT MANAGER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt: 10 / 14 / 2010  
Transaction ID: SA11.1647  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
WILLIAM LEWIT  
Mailing Address 25 VALLEY RD  
City State Zip Code  
SCARSDALE NY 10583-1126  
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 ▼ 360.00  
Date of Receipt: 10 / 14 / 2010  
Transaction ID: SA11.1196  
Amount of Each Receipt this Period: 180.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 680.00  
**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 74 / 292

(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)  
WILLIAM LEWIT

Mailing Address 25 VALLEY RD

City State Zip Code  
SCARSDALE NY 10583-1126

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) ▼ 360.00

Date of Receipt

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

Transaction ID: SA11.3635

Amount of Each Receipt this Period

180.00

CONTRIBUTION

**B.**

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

Mailing Address 304 COVE TERRACE SHOPPING CTR

City State Zip Code  
COPPERAS COVE TX 76522-2261

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

Name of Employer Occupation  
JOHN LISTER, INCORPORATED, P.C. PRESIDENT

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3304

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
KEN LITVACK

Mailing Address 899 APPLEBY ST

City State Zip Code  
BOCA RATON FL 33487-2444

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) ▼ 250.00

Date of Receipt

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

Transaction ID: SA11.1198

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

680.00

**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 75 / 292  
(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)  
MR. RONALD LIVINGSTON

Mailing Address 1005 EMERALD BAY

City State Zip Code  
LAGUNA BEACH CA 92651-1231

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  

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

Transaction ID: SA11.2320

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
GERALD LODGE

Mailing Address 1021 PARK AVE

City State Zip Code  
NEW YORK NY 10028-0959

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

Name of Employer CREDIT SUISSE  
Occupation BANKER

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	8	/	2	0	1	0

Transaction ID: SA11.2035

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
HARRY J. LONGWELL

Mailing Address 5223 PARK LANE

City State Zip Code  
DALLAS TX 75220-2145

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

Name of Employer EXXON MOBIL  
Occupation 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	8	/	2	0	1	0

Transaction ID: SA11.4111

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 76 / 292  
(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)  
H.M. LOUD

Mailing Address P.O.BOX 11660

City ASPEN State CO Zip Code 81612-9509

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

Name of Employer SELF-EMPLOYED Occupation CPA/REALTOR/INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 21 / 2010  
**Transaction ID: SA11.2534**  
 Amount of Each Receipt this Period: 500.00  
**CONTRIBUTION**

**B.**

Full Name (Last, First, Middle Initial)  
LARRY LUBER

Mailing Address 7430 SOMERSET AVE.

City ST. LOUIS State MO Zip Code 63105-2924

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

Name of Employer SECURE ENERGY Occupation CONSTRUCTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 25 / 2010  
**Transaction ID: SA11.2624**  
 Amount of Each Receipt this Period: 250.00  
**CONTRIBUTION**

**C.**

Full Name (Last, First, Middle Initial)  
DOUGLAS LUCAS

Mailing Address 8 BERRYBROOK CIRCLE

City CHAPPAQUA State NY Zip Code 10514-1624

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

Name of Employer MOODY'S Occupation CREDIT ANALYST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 27 / 2010  
**Transaction ID: SA11.3856**  
 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 77 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) HARRY LUCAS, JR.	Date of Receipt MM / DD / YYYY 11 / 15 / 2010
	Mailing Address 2303 RIO GRANDE STREET	<b>Transaction ID:</b> SA11.4283
	City State Zip Code AUSTIN TX 78705-5131	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer LUCAS PETROLEUM GROUP, INC.	Occupation CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) CHRISTOPHER LYNCH	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 151 WEST 86TH STREET APT 5C	<b>Transaction ID:</b> SA11.2689
	City State Zip Code NEW YORK NY 10024-3401	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer JPMORGAN	Occupation BANKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MR. EDWARD G. MACK	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 1804 CREEKSIDE COURT	<b>Transaction ID:</b> SA11.2843
	City State Zip Code DARIEN IL 60561-5300	Amount of Each Receipt this Period 2000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>7250.00</b>
<b>TOTAL</b> 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 78 / 292

(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)  
WADE MACQUARRIE

Mailing Address 12200 ZIELIAN COURT

City State Zip Code  
TUSTIN CA 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 ▼  
350.00

Date of Receipt

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

Transaction ID: SA11.3638

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
PETER A. MAGOWAN

Mailing Address 2100 WASHINGTON STREET

City State Zip Code  
SAN FRANCISCO CA 94109-2845

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

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

Transaction ID: SA11.4154

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.**

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

Mailing Address 1133 N DEARBORN ST.  
APT. 2301

City State Zip Code  
CHICAGO IL 60610-7187

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

Name of Employer  
LOMBARDIA CAPITAL PARTNERS

Occupation  
RESEARCH ANALYST

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 4 / 2 0 1 0

Transaction ID: SA11.1897

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

2100.00

**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 79 / 292  
(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)  
THOMAS MALLOY

Mailing Address 9292 HUNTING CIRCLE

City State Zip Code  
VILLA PARK CA 92861-2307

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

Name of Employer Occupation  
TRENCH SHORING CO. OWNER

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 8 / 2 0 1 0

**Transaction ID:** SA11.4227

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DR. ERNEST MARIO

Mailing Address 350 SOUTH RIVER ROAD  
APT. A 8

City State Zip Code  
NEW HOPE PA 18938-1280

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

Name of Employer Occupation  
CAPNIA CEO

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 / 1 8 / 2 0 1 0

**Transaction ID:** SA11.4105

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SCOT MARTIN

Mailing Address 2624 S. 11TH STREET

City State Zip Code  
SAINT LOUIS MO 63118-1812

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

Name of Employer Occupation  
WILD OLIVE CONSULTING CONSULTANT

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 / 2 1 / 2 0 1 0

**Transaction ID:** SA11.2690

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 26250.00

**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 80 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. WILLIAM F. MARTIN		Date of Receipt
	Mailing Address 835 TROPICAL CIRCLE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	City	State	Zip Code
	SARASOTA	FL	34242-1440
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.2781
Name of Employer CHATEAU PRODUCTS INC.		Occupation PRESIDENT	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 ▼	<input type="text"/> 250.00
			CONTRIBUTION

<b>B.</b>	Full Name (Last, First, Middle Initial) WARNER MASON		Date of Receipt
	Mailing Address 2 THICKET ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 1 4 / 2 0 1 0
	City	State	Zip Code
	BALTIMORE	MD	21212-2460
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.1668
Name of Employer WEBB/MASON		Occupation PRESIDENT	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 ▼	<input type="text"/> 500.00
			CONTRIBUTION

<b>C.</b>	Full Name (Last, First, Middle Initial) WARNER MASON		Date of Receipt
	Mailing Address 2 THICKET ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	City	State	Zip Code
	BALTIMORE	MD	21212-2460
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.3740
Name of Employer WEBB/MASON		Occupation PRESIDENT	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 ▼	<input type="text"/> 100.00
			CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 850.00
<b>TOTAL</b> 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 81 / 292  
(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)  
ROBERT MAZUR

Mailing Address 124 GREENS WAY

City State Zip Code  
WILLIAMSBURG VA 23185-8929

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

Name of Employer Occupation  
SELF 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 5 / 2 0 1 0

Transaction ID: SA11.946

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL D. MCCORMICK

Mailing Address 39429 N TOM MORRIS ROAD

City State Zip Code  
SCOTTSDALE AZ 85262-2608

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 / 2 5 / 2 0 1 0

Transaction ID: SA11.4168

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SCOTT MCGEORGE

Mailing Address P.O. BOX 7008

City State Zip Code  
PINE BLUFF AR 71611-7008

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

Name of Employer Occupation  
PINE BLUFF SAND & GRAVEL CO PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

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

Transaction ID: SA11.4085

Amount of Each Receipt this Period  
10000.00

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 82 / 292  
(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)  
THOMAS E. MCINERNEY

Mailing Address 16 BLUFF COURT

City WESTPORT State CT Zip Code 06880-6902

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

Name of Employer BLUFF POINT ASSOCIATES Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 20 / 2010  
Transaction ID: SA11.4134  
Amount of Each Receipt this Period 50000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DAVID MCMURRAIN

Mailing Address BOX 02555805

City SIOUX FALLS State SD Zip Code 57186-0001

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

Name of Employer CHILDPLUS SOFTWARE Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 17 / 2010  
Transaction ID: SA11.4047  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
ALAN MCNEILL

Mailing Address 479 PINE STREET

City BEAUMONT State TX Zip Code 77701-2317

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 15 / 2010  
Transaction ID: SA11.4082  
Amount of Each Receipt this Period 2500.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 53000.00

**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 83 / 292  
(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)  
DR. ALEXANDRIA Z. MECCIA

Mailing Address 7520 RIDGEWOOD LANE

City State Zip Code  
BURR RIDGE IL 60527-5159

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

Name of Employer  
DERMATOLOGY ASSOCIATES OF LA GRANGE

Occupation  
PHYSICIAN

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
10 / 21 / 2010

Transaction ID: SA11.2099

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DENA MEEK

Mailing Address 560 DIAMOND POINT

City State Zip Code  
OAK POINT TX 75068-2256

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 ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2010

Transaction ID: SA11.3644

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
KIRK MENDEZ

Mailing Address 960 PUERTA DEL SOL

City State Zip Code  
LAS VEGAS NV 89138-6057

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

Name of Employer  
SELF-EMPLOYED

Occupation  
PHYSICIAN

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
MM / DD / YYYY  
10 / 22 / 2010

Transaction ID: SA11.2559

Amount of Each Receipt this Period  
750.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

**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 84 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) BRUCE MERRILL	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address P.O. BOX 3350	<b>Transaction ID:</b> SA11.4182
	City State Zip Code CAREFREE AZ 85377-3350	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation SELF-EMPLOYED BUSINESS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) STEPHEN MESSENGER	Date of Receipt MM / DD / YYYY 10 / 24 / 2010
	Mailing Address 20130 ROTHBURY LANE 5311	<b>Transaction ID:</b> SA11.2597
	City State Zip Code MONTGOMERY VILLAGE MD 20886-1445	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation MEI COMPANY ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN METZGER	Date of Receipt MM / DD / YYYY 10 / 17 / 2010
	Mailing Address 6888 PAXSON ROAD	<b>Transaction ID:</b> SA11.4048
	City State Zip Code NEW HOPE PA 18938-9660	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation SMYYTH LLC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1500.00
<b>TOTAL</b> 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 85 / 292  
(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)  
JOHN MICHAEL

Mailing Address 8780 W. GOLF RD., SUITE 304

City NILES State IL Zip Code 60714-5611

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

Name of Employer RII Occupation DOCTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 24 / 2010  
Transaction ID: SA11.2474  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MR. ARTHUR W. MILAM

Mailing Address P.O. BOX 446

City PONTE VEDRA BEACH State FL Zip Code 32004-0446

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 ▼ 2500.00

Date of Receipt: 11 / 04 / 2010  
Transaction ID: SA11.3915  
Amount of Each Receipt this Period: 500.00  
CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
BEN MILLER

Mailing Address 9017 BROW LAKE RD.

City SODDY DAISY State TN Zip Code 37379-4510

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

Name of Employer UNUM Occupation PORTFOLIO MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt: 10 / 19 / 2010  
Transaction ID: SA11.1953  
Amount of Each Receipt this Period: 50.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1550.00

**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 86 / 292  
(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)  
BEN MILLER  
Mailing Address 9017 BROW LAKE RD.  
City State Zip Code  
SODDY DAISY TN 37379-4510  
FEC ID number of contributing federal political committee. **C**  
Name of Employer UNUM Occupation PORTFOLIO MANAGER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 10 / 28 / 2010  
Transaction ID: SA11.3649  
Amount of Each Receipt this Period 25.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
BEN MILLER  
Mailing Address 9017 BROW LAKE RD.  
City State Zip Code  
SODDY DAISY TN 37379-4510  
FEC ID number of contributing federal political committee. **C**  
Name of Employer UNUM Occupation PORTFOLIO MANAGER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 225.00  
Date of Receipt 10 / 27 / 2010  
Transaction ID: SA11.3743  
Amount of Each Receipt this Period 50.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
HENRY S. MILLER  
Mailing Address 153 EAST 53RD STREET  
22ND FLOOR  
City State Zip Code  
NEW YORK NY 10022  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MILLER BUCKFIRE & CO., LLC Occupation EXECUTIVE  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10000.00  
Date of Receipt 10 / 20 / 2010  
Transaction ID: SA11.4135  
Amount of Each Receipt this Period 10000.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10075.00  
**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 87 / 292  
(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)  
MICHAEL MILLER

Mailing Address 4402 BOXWOOD ROAD

City State Zip Code  
BETHESDA MD 20816-1818

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 10 / 22 / 2010  
Transaction ID: SA11.2644  
Amount of Each Receipt this Period: 500.00  
CONTRIBUTION

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

Mailing Address 4402 BOXWOOD ROAD

City State Zip Code  
BETHESDA MD 20816-1818

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

Name of Employer SELF-EMPLOYED Occupation INVESTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt: 10 / 18 / 2010  
Transaction ID: SA11.4088  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MILFORD MILLER

Mailing Address 621 CHASE CREEK RUN

City State Zip Code  
FORT WAYNE IN 46804

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 28 / 2010  
Transaction ID: SA11.3648  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 88 / 292  
(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)  
KENNETH MINTER

Mailing Address 216 MERRIE WAY LN

City HOUSTON State TX Zip Code 77024-7435

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

Name of Employer BFL Occupation EXECUTIVE RECRUITER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 19 / 2010  
Transaction ID: SA11.2038  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CHARLOTTE L. MITCHELL

Mailing Address 1750 ST. CHARLES AVENUE, PH-L

City NEW ORLEANS State LA Zip Code 70130-6730

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

Name of Employer SELF-EMPLOYED Occupation PHOTOGRAPHER/CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt: 10 / 14 / 2010  
Transaction ID: SA11.1681  
Amount of Each Receipt this Period: 2500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. LOUIS MONACO, JR.

Mailing Address 1487 SHELBURNE COURT

City ALLENTOWN State PA Zip Code 18104-1949

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

Name of Employer UNICAST CO Occupation CHAIRMAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 25 / 2010  
Transaction ID: SA11.2259  
Amount of Each Receipt this Period: 1000.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 3750.00

**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 89 / 292

(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)  
LARRY MONROE

Mailing Address P.O. BOX 366

City State Zip Code  
BLOUNTSVILLE AL 35031-0366

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

Name of Employer Occupation  
SOUTHERN COMPANY RESEARCH ENGINEER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 505.00

Date of Receipt

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

Transaction ID: SA11.2039

Amount of Each Receipt this Period

505.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
GLENN MOOR

Mailing Address 6204 17TH ST

City State Zip Code  
LUBBOCK TX 79416-6133

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

Name of Employer Occupation  
SOUTHEAST MARKETING

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 6 / 2 0 1 0

Transaction ID: SA11.1683

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
STEVE MOORE

Mailing Address 2368 OBERON WALK

City State Zip Code  
SMYRNA GA 30080-5994

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

Name of Employer Occupation  
TEALEAF SALES

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 5 / 2 0 1 0

Transaction ID: SA11.1684

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

1005.00

**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 90 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. JUNUIS S. MORGAN		Date of Receipt
	Mailing Address 7600 TIMBERLY COURT		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	MCLEAN	VA	22102-2522
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.2129
Name of Employer SELF-EMPLOYED		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 ▼	<input type="text" value="250.00"/>
			CONTRIBUTION

<b>B.</b>	Full Name (Last, First, Middle Initial) GREGORY MORNEAU		Date of Receipt
	Mailing Address 8749 KILBIRNIE TERRACE		<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	BROOKLYN PARK	MN	55443-1928
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.3352
Name of Employer SEKEL ASSOCIATES, INC.		Occupation CONSULTANT	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 ▼	<input type="text" value="250.00"/>
			CONTRIBUTION

<b>C.</b>	Full Name (Last, First, Middle Initial) WILLIAM MORRISON, JR		Date of Receipt
	Mailing Address 23 SIMARA ST		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	STUART	FL	34996-6326
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11.2692
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		Occupation INFORMATION REQUESTED PER BEST EFFORTS	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 ▼	<input type="text" value="500.00"/>
			CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1000.00"/>
<b>TOTAL</b> 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 91 / 292
	(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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) KENNETH MORTENSON	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 21 S END AVE., APT. PH 1D	Transaction ID: SA11.4222
	City State Zip Code NEW YORK NY 10280-1070	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	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 ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN MUMFORD	Date of Receipt MM / DD / YYYY 10 / 26 / 2010
	Mailing Address 2925 WOODSIDE ROAD	Transaction ID: SA11.4177
	City State Zip Code WOODSIDE CA 94062-2443	Amount of Each Receipt this Period 25000.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer Occupation CROSSPOINT CORP INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT MADISON MURPHY	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 200 N JEFFERSON AVENUE STE. 400	Transaction ID: SA11.4083
	City State Zip Code EL DORADO AR 71730-5854	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer Occupation MURPHY OIL CORPORATION EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	40000.00
<b>TOTAL</b> 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 92 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) LARRY NAFE	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 8611 BARRETT RD	<b>Transaction ID:</b> SA11.2040
	City ROLAND State AR Zip Code 72135-9779	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer SELF-EMPLOYED Occupation VETERINARIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) T. CRAIG NAUERT	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 6066 RIVER OKAS RD.	<b>Transaction ID:</b> SA11.1994
	City MEMPHIS State TN Zip Code 38120-2547	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer MID-SOUTH IMAGING AND THE-RAPEUTICS, P. Occupation PHYSICIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) CAROL NEFF	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 11414 WEST CTR ROAD SUITE 150	<b>Transaction ID:</b> SA11.3364
	City OMAHA State NE Zip Code 68144-4473	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer REMEDY INTELLIGENT STAFFI-NG Occupation OWNER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1500.00
<b>TOTAL</b> 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 93 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) JEFFREY NEILSON	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 294 TOURAIN ROAD	<b>Transaction ID:</b> SA11.2708
	City State Zip Code GROSSE POINTE FARM MI 48236-3363	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation LIPSON NEILSON ET AL ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ERIC NENNEMAN	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 550 14TH ROAD S #810	<b>Transaction ID:</b> SA11.1701
	City State Zip Code ARLINGTON VA 22202-7412	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation SRA ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ERIC NENNEMAN	Date of Receipt MM / DD / YYYY 10 / 23 / 2010
	Mailing Address 550 14TH ROAD S #810	<b>Transaction ID:</b> SA11.2584
	City State Zip Code ARLINGTON VA 22202-7412	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation SRA ANALYST	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1350.00
<b>TOTAL</b> 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 94 / 292

(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)  
ERIC NENNEMAN

Mailing Address 550 14TH ROAD S #810

City State Zip Code  
ARLINGTON VA 22202-7412

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

Name of Employer Occupation  
SRA ANALYST

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
10 / 29 / 2010

Transaction ID: SA11.3651

Amount of Each Receipt this Period

50.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
ERIC NEUMAN

Mailing Address 4446 LORRAINE

City State Zip Code  
DALLAS TX 75205-3611

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

Name of Employer Occupation  
HICKS HOLDINGS INVESTOR

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

Date of Receipt

M M / D D / Y Y Y Y  
10 / 19 / 2010

Transaction ID: SA11.2043

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**C.**

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

Mailing Address 4600 MILITARY TRL, STE 222

City State Zip Code  
JUPITER FL 33458-4813

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

Name of Employer Occupation  
YORK MANAGEMENT & RESEARCH PRESIDENT

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

Date of Receipt

M M / D D / Y Y Y Y  
10 / 24 / 2010

Transaction ID: SA11.2598

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

6050.00

**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 95 / 292

(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)  
RONALD NICOL

Mailing Address 6897 MEMORIAL DRIVE

City State Zip Code  
FRISCO TX 75034-7295

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

Name of Employer Occupation  
THE BOSTON CONSULTING GRO- SENIOR PARTNER AND DIRECTOR  
UP

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 6 / 2 0 1 0

Transaction ID: SA11.1702

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
PATRICIA M. O'BRIEN

Mailing Address 535 E 86TH STREET  
APT. 20D

City State Zip Code  
NEW YORK NY 10028-7533

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 / 2 1 / 2 0 1 0

Transaction ID: SA11.4147

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
DAVID P. O'CONNOR

Mailing Address 223 CANTERBURY ROAD

City State Zip Code  
WESTFIELD NJ 07090-1904

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

Name of Employer Occupation  
HIGH RISE CAPITAL MANAGEM- INVESTMENT MANAGER  
ENT

Receipt For: Aggregate Year-to-Date  
 Primary  General  
 Other (specify) ▼ 25000.00

Date of Receipt

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

Transaction ID: SA11.4187

Amount of Each Receipt this Period

25000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

26500.00

**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 96 / 292  
(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)  
BRADLEY O'LEARY

Mailing Address 3050 TAMMARON BLVD. #2110

City State Zip Code  
AUSTIN TX 78746-8001

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

Name of Employer Occupation  
PM CONSULTING PRESIDENT

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 8 / 2 0 1 0

Transaction ID: SA11.4095

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CLAUDIO OCHOA

Mailing Address 14 WEST 14TH STREET, APT 7C

City State Zip Code  
NEW YORK NY 10011-7526

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

Name of Employer Occupation  
MORVILLO ABRAMOWITZ 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 / 2 4 / 2 0 1 0

Transaction ID: SA11.2599

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DANIEL OGDEN

Mailing Address 263 GLENVILLE ROAD

City State Zip Code  
GREENWICH CT 06831-4148

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

Name of Employer Occupation  
DOCK STREET ASSETS FINANCIAL ADVISER

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 4 / 2 0 1 0

Transaction ID: SA11.1711

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **3750.00**

**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 97 / 292  
(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)  
JDITH OLAH

Mailing Address 2252 GLOAMING WAY

City State Zip Code  
BEVERLY HILLS CA 90210-1717

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 / 1 8 / 2 0 1 0

Transaction ID: SA11.2044

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.**

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

Mailing Address 18 BENNETT PLACE

City State Zip Code  
WESTFIELD NJ 07090-2311

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

Name of Employer Occupation  
SELF-EMPLOYED CPA

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 4 / 2 0 1 0

Transaction ID: SA11.1713

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
TIMOTHY OPEL

Mailing Address 4931 BONITA BAY BLVD #902

City State Zip Code  
BONITA SPRINGS FL 34134-1709

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 4 / 2 0 1 0

Transaction ID: SA11.1714

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 98 / 292  
(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)  
MR. BRYAN M. PARK

Mailing Address 13906 SW 216TH STREET

City State Zip Code  
VASHON WA 98070-6335

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

Name of Employer Occupation  
PACIFIC NORTHERN CO DEVELOPER

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 / 2 5 / 2 0 1 0

Transaction ID: SA11.2281

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DAVID F. PARKER

Mailing Address 1608 ST. ANDREWS ROAD

City State Zip Code  
GREENSBORO NC 27408-6516

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

Name of Employer Occupation  
TRIANGLE CAPITAL PARTNERS INVESTMENT BANKER

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 / 2 6 / 2 0 1 0

Transaction ID: SA11.4180

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL PARKS

Mailing Address 140 CARMELVIEW DR.

City State Zip Code  
CARMEL IN 46032-2266

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

Name of Employer Occupation  
UPS SUPPORT STAFF

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 / 2 4 / 2 0 1 0

Transaction ID: SA11.2600

Amount of Each Receipt this Period  
500.00

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 99 / 292

(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)  
WILLIAM PARR

Mailing Address 1200 BELFORD AVE.

City State Zip Code  
OKLAHOMA CITY OK 73116-6205

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

Name of Employer Occupation  
SELF-EMPLOYED PETROLEUM EXECUTIVE

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 4 / 2 0 1 0

Transaction ID: SA11.1719

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
EDWARD PATTERSON

Mailing Address 4235 NAVAJO TRL NE

City State Zip Code  
ATLANTA GA 30319-1532

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 / 2 1 / 2 0 1 0

Transaction ID: SA11.2693

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

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

Mailing Address 10000 SHELBYVILLE ROAD  
STE. 100

City State Zip Code  
LOUISVILLE KY 40223-2950

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 ▼ 10000.00

Date of Receipt

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

Transaction ID: SA11.4117

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

10500.00

**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 100 / 292  
(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) DAVID PAUL		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 153 OLD FIELD RD		<b>Transaction ID:</b> SA11.1257
City OLD FIELD	State NY	Zip Code 11733-1639
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer LONG ISLAND ANESTHESIA PHYSICIANS	Occupation ANESTHESIOLOGIST	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) JEFFREY PAULUS		Date of Receipt MM / DD / YYYY 10 / 27 / 2010
Mailing Address 4450 E NEUMAN RD		<b>Transaction ID:</b> SA11.3866
City SUPERIOR	State WI	Zip Code 54880-8439
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer SUPERIOR WATER AND LIGHT	Occupation METER TECHNICIAN	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) THOMAS L. PEARSON		Date of Receipt MM / DD / YYYY 10 / 21 / 2010
Mailing Address 6935 E 116TH STREET S		<b>Transaction ID:</b> SA11.4148
City BIXBY	State OK	Zip Code 74008-8212
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 175000.00
Name of Employer SELF-EMPLOYED	Occupation INVESTOR	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 175000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	176000.00
<b>TOTAL</b> 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 101 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) JEREMY PERELMAN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 125 WEST 22ND ST APT. #5B	Transaction ID: SA11.3397
	City NEW YORK State NY Zip Code 10011-2647	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer J. GOLDMAN & CO., L.P. Occupation INVESTMENT ADVISOR Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ANDY PEREZ	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 4370 PEACHTREE ROAD,NE SUITE 150	Transaction ID: SA11.2046
	City ATLANTA State GA Zip Code 30319-3055	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer WASCOR Occupation PRESIDENT Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) GEORGE PERRIN	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 609 BEAVERTAIL ROAD	Transaction ID: SA11.1260
	City JAMESTOWN State RI Zip Code 02835-2819	Amount of Each Receipt this Period 2500.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 2500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3750.00
<b>TOTAL</b> 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 102 / 292  
(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) MARY PETERS		Date of Receipt MM / DD / YYYY 10 / 16 / 2010
Mailing Address 8323 W. VIA MONTOYA DR		<b>Transaction ID:</b> SA11.1263
City PEORIA	State AZ	Zip Code 85383-2019
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer MARY E. PETERS CONSULTING GROUP, LLC	Occupation PRINCIPAL	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) STEVE PITTS		Date of Receipt MM / DD / YYYY 10 / 20 / 2010
Mailing Address 1555 THE BOARDWALK SUITE 5		<b>Transaction ID:</b> SA11.1960
City HUNTSVILLE	State AL	Zip Code 35816-1821
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer PENTA RESEARCH	Occupation ENGINEER	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) WILLIAM PROVINSE		Date of Receipt MM / DD / YYYY 10 / 24 / 2010
Mailing Address P.O. BOX 3561		<b>Transaction ID:</b> SA11.2603
City HOLIDAY	State FL	Zip Code 34692-0561
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation CONSULTANT	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1750.00</b>
<b>TOTAL</b> 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 103 / 292  
(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)  
MARYBETH L. PULLUM

Mailing Address 382 VISTA OAK DRIVE

City State Zip Code  
LONGWOOD FL 32779-3067

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

Name of Employer Occupation  
PULLUM & PULLUM 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 / 2 9 / 2 0 1 0

**Transaction ID:** SA11.4189

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
MR. ROBERT RADICE

Mailing Address 3250 NE 56TH COURT

City State Zip Code  
FORT LAUDERDALE FL 33308-2806

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 1 / 0 1 / 2 0 1 0

**Transaction ID:** SA11.3055

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
VINCENT MARK RAFANELLI

Mailing Address 1 BATES BLVD.

City State Zip Code  
ORINDA CA 94563-2800

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

Name of Employer Occupation  
RAFFANELLI & NAHAS REAL ESTATE DEVELOPER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

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

**Transaction ID:** SA11.4146

Amount of Each Receipt this Period  
10000.00

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 104 / 292  
(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) DAVID RAINES		Date of Receipt MM / DD / YYYY 10 / 29 / 2010
Mailing Address 611 GRAMMONT ST		Transaction ID: SA11.3663
City MONROE	State LA	Zip Code 71201-7516
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer GI CLINIC	Occupation PHYSICIAN	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) THOMAS S. RAKOW		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address P.O. BOX 545		Transaction ID: SA11.4103
City ELGIN	State IL	Zip Code 60121-0545
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer IHC CONSTRUCTION LLC	Occupation CONTRACTOR	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 R. RALSTON		Date of Receipt MM / DD / YYYY 10 / 27 / 2010
Mailing Address P.O. BOX 29188		Transaction ID: SA11.3749
City DALLAS	State TX	Zip Code 75229-0188
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer RALSTON OUTDOOR ADVERTISING	Occupation OWNER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1750.00
<b>TOTAL</b> 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 105 / 292  
(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)  
JENNIFER RAND

Mailing Address 45 COUNTRY CLUB RD SW

City State Zip Code  
LAKEWOOD WA 98498-5314

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 ▼ 2500.00

Date of Receipt: 10 / 22 / 2010  
Transaction ID: SA11.2565  
Amount of Each Receipt this Period: 2500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CLIFF RAYMOND

Mailing Address 2419 HODGES BEND CIR

City State Zip Code  
SUGAR LAND TX 77479-1304

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

Name of Employer Occupation  
DCP MIDSTREAM PROCESS CONTROL ANALYST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 24 / 2010  
Transaction ID: SA11.2664  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
FRANK REEVES

Mailing Address 2016 NEW MARKET AVE.

City State Zip Code  
LEBANON TN 37087-4258

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

Name of Employer Occupation  
HIX & GRAY, PLC ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 19 / 2010  
Transaction ID: SA11.1962  
Amount of Each Receipt this Period: 500.00  
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 106 / 292

(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)  
MR. J. E. REEVES, JR.

Mailing Address INFO REQUESTED

City State Zip Code  
INFO REQUESTED XX 99999

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

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

Transaction ID: SA11.2267

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MARY REEVES

Mailing Address 14314 BEACONS TRACE CT

City State Zip Code  
HOUSTON TX 77069-1438

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

Name of Employer  
M E REEVES CONTRACTING,  
INC

Occupation  
BUSINESS 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 6 / 2 0 1 0

Transaction ID: SA11.927

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
SAMUEL T. REEVES

Mailing Address 12167 TURTLE BEACH ROAD

City State Zip Code  
NORTH PALM BEACH FL 33408-2940

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

Name of Employer  
PINNACLE TRADING LLC

Occupation  
EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt

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

Transaction ID: SA11.4104

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

10500.00

**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 107 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) DR. STEVEN J. REITER	Date of Receipt MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 14728 HOLLYHOCK DRIVE	<b>Transaction ID:</b> SA11.4136
	City State Zip Code OKLAHOMA CITY OK 73142-1804	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation PLAZA MEDICAL GROUP PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) DAVID REYNOLDS	Date of Receipt MM / DD / YYYY 10 / 21 / 2010
	Mailing Address 22830 HIDDEN CREEK COURT	<b>Transaction ID:</b> SA11.2640
	City State Zip Code MURRIETA CA 92562-5093	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation SELF-EMPLOYED ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT REYNOLDS	Date of Receipt MM / DD / YYYY 10 / 24 / 2010
	Mailing Address 153 GARFIELD RD.	<b>Transaction ID:</b> SA11.2476
	City State Zip Code CONCORD MA 01742-4905	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation PUTNAM INVESTMENTS EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>10250.00</b>
<b>TOTAL</b> 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 108 / 292  
(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) ANDREW RICHARDSON		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address 40 CENTRAL PARK SOUTH 19C		<b>Transaction ID:</b> SA11.1282
City NEW YORK	State NY	Zip Code 10019-1633
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1000.00
Name of Employer NORTHSTAR REALTY FINANCE CORP.	Occupation CFO	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

**B.**

Full Name (Last, First, Middle Initial) FRANK E. RICHARDSON		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 19 EAST 72ND STREET		<b>Transaction ID:</b> SA11.4114
City NEW YORK	State NY	Zip Code 10021-4145
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer F.E. RICHARDSON & CO, INC.	Occupation PRIVATE INVESTOR	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) KAREN RICHARDSON		Date of Receipt MM / DD / YYYY 10 / 28 / 2010
Mailing Address 420 CLARK STREET		<b>Transaction ID:</b> SA11.3668
City SOUTH ORANGE	State NJ	Zip Code 07079-2940
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 50.00
Name of Employer HOMEMAKER	Occupation HOMEMAKER	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>6050.00</b>
<b>TOTAL</b> 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 109 / 292  
(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)  
MICHAEL RICHARDS

Mailing Address 2086 TRESTLE GLEN RD

City State Zip Code  
WALNUT CREEK CA 94598-2334

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

Name of Employer Occupation  
DELOITTE CONSULTANT

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 4 / 2 0 1 0

**Transaction ID:** SA11.1747

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 6306 KURY LANE

City State Zip Code  
HOUSTON TX 77008-3226

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

Name of Employer Occupation  
UHY ADVISORS 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 / 2 8 / 2 0 1 0

**Transaction ID:** SA11.3868

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
AMY RIDDICK

Mailing Address 11517 FAIRFAX STATION RD

City State Zip Code  
FAIRFAX STATION VA 22039-1130

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

**Transaction ID:** SA11.3420

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 110 / 292  
(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)  
MRS. FRANCES ROBERTS

Mailing Address 2951 CASTLEWOOD DRIVE

City State Zip Code  
MACON GA 31204-1404

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: 11 / 16 / 2010  
Transaction ID: SA11.4054  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DR. RICHARD H. ROBERTS

Mailing Address 120 ARBUTUS DRIVE

City State Zip Code  
LAKEWOOD NJ 08701-1614

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

Name of Employer Occupation  
MUTUAL PHARMACEUTICAL CO. CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt: 10 / 21 / 2010  
Transaction ID: SA11.4152  
Amount of Each Receipt this Period: 50000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DANIEL ROBINS

Mailing Address 1589 BRICE RD

City State Zip Code  
REYNOLDSBURG OH 43068-2701

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

Name of Employer Occupation  
HORIZON BUSINESS SOLUTIONS ACCOUNTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 28 / 2010  
Transaction ID: SA11.3427  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 50500.00

**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 111 / 292  
(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)  
JOHN D. ROBINSON

Mailing Address 3440 RAEFORD ROAD

City State Zip Code  
ORLANDO FL 32806-5752

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

Name of Employer DEAN RINGERS ET AL      Occupation ATTORNEY

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	8	/	2	0	1	0

**Transaction ID:** SA11.4118

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
H D ROBUCK JR

Mailing Address 610 EAST MAIN STREET

City State Zip Code  
LEESBURG FL 34748-5316

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

Name of Employer RO-MAC LUMBER      Occupation EXECUTIVE

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	/	2	1	/	2	0	1	0

**Transaction ID:** SA11.2536

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
EDDY J. ROGERS, JR

Mailing Address 3101 RED CORRAL RANCH ROAD

City State Zip Code  
WIMBERLEY TX 78676-4129

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

Name of Employer ANDREWS KURTH LLP      Occupation ATTORNEY

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	6	/	2	0	1	0

**Transaction ID:** SA11.1286

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 112 / 292

(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)  
WILLIAM H. ROJ

Mailing Address 19200 N PARK BLVD.

City State Zip Code  
SHAKER HEIGHTS OH 44122-1817

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 ▼ 20500.00

Date of Receipt

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

Transaction ID: SA11.4124

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
MAILE ROMANOWSKI

Mailing Address 1130 WAIKUI PLACE

City State Zip Code  
HONOLULU HI 96821-1105

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

Name of Employer Occupation  
JAS. W. GLOVER ENGINEER

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3430

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
GENE ROSE

Mailing Address 5902 BIGHORN DR

City State Zip Code  
ROANOKE VA 24018-2704

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 9 / 2 0 1 0

Transaction ID: SA11.1964

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 113 / 292  
(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)  
LUKE ROSE

Mailing Address 64 GRAND RIO CIRCLE

City State Zip Code  
SACRAMENTO CA 95826-1719

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  
10 / 27 / 2010

**Transaction ID:** SA11.3871

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ROBERT M. ROSENTHAL

Mailing Address 11703 CANTON PLACE

City State Zip Code  
STUDIO CITY CA 91604-4166

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  
10 / 18 / 2010

**Transaction ID:** SA11.4110

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
MR. DUANE G. ROST

Mailing Address 107 W. MADISON STREET

City State Zip Code  
PULASKI TN 38478-3231

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:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 20 / 2010

**Transaction ID:** SA11.2245

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 25500.00

**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 114 / 292  
(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

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)  
CHRISTOPH RUECKEL

Mailing Address 3090 ARDEN ROAD

City ATLANTA State GA Zip Code 30305-1915

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

Name of Employer BRIDGEHOUSE LAW Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 17 / 2010

Transaction ID: SA11.3996

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
PETER SAKON

Mailing Address 199 BLEECKER ST APT 1

City NEW YORK State NY Zip Code 10012-1481

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

Name of Employer HSBC Occupation TRADER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 31 / 2010

Transaction ID: SA11.3442

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

**C.**

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

Mailing Address P.O. BOX 1218

City MILL CITY State OR Zip Code 97360-1218

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

Name of Employer US FOREST SERVICE Occupation CIVIL ENGINEER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 17 / 2010

Transaction ID: SA11.4051

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 115 / 292  
(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)  
SAM SCAMARDO

Mailing Address 7500 CODER ROAD

City State Zip Code  
MAUMEE OH 43537-9345

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

Name of Employer Occupation  
ADVANCED ROOFING SERVICES, INC. PRESIDENT/CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2010

Transaction ID: SA11.3672

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JONATHAN SCANLON

Mailing Address 331 CANTERWOOD LANE

City State Zip Code  
GREAT FALLS VA 22066-1126

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

Name of Employer Occupation  
WINSTON PARTNERS INVESTMENT MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 25 / 2010

Transaction ID: SA11.2495

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
CHRIS SCHAFFER

Mailing Address 110 HAPPY ACRES RD

City State Zip Code  
LOS GATOS CA 95032-5704

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

Name of Employer Occupation  
THOMAS FOGARTY MD ACCOUNTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
10 / 14 / 2010

Transaction ID: SA11.1764

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 116 / 292  
(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)  
CHRIS SCHAFFER

Mailing Address 110 HAPPY ACRES RD

City State Zip Code  
LOS GATOS CA 95032-5704

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

Name of Employer THOMAS FOGARTY MD      Occupation ACCOUNTANT

Receipt For:  Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

**Transaction ID:** SA11.3674

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 14 ANJOU

City State Zip Code  
NEWPORT COAST CA 92657-1036

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 ▼ 1500.00

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

**Transaction ID:** SA11.4216

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
SCOTT SCHOENBERGER

Mailing Address 5855 FILAREE

City State Zip Code  
MALIBU CA 90265-3718

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

Name of Employer KAS ENGINEERING      Occupation BUSINESS 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 / 2 1 / 2 0 1 0

**Transaction ID:** SA11.2538

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 5350.00

**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 117 / 292  
(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)  
CARL SCHULTZ

Mailing Address 13785 BALD CYPRESS CIRCLE

City State Zip Code  
FORT MYERS FL 33907-1843

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 / 1 4 / 2 0 1 0

Transaction ID: SA11.1298

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
LANCE SCHULZ

Mailing Address 17818 ENGLEWOOD CIRCLE

City State Zip Code  
OMAHA NE 68135-3407

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

Name of Employer Occupation  
TD AMERITRADE HOLDING CORPORATION ACCOUNTING DIRECTOR

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 5 / 2 0 1 0

Transaction ID: SA11.1770

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
GEORGE SCHUTTER

Mailing Address 611 ELLIOTT ST NE

City State Zip Code  
WASHINGTON DC 20002-5417

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

Name of Employer Occupation  
GRANT THORNTON EXECUTIVE DIRECTOR

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3872

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 118 / 292
	(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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) DONALD R. SCIFRES	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 26700 PALO HILLS DRIVE	Transaction ID: SA11.4119
	City State Zip Code LOS ALTOS HILLS CA 94022-1927	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer Occupation SELF-EMPLOYED INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MR. EDWARDS E. SEASTRAND	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 12 KESWICK LANE	Transaction ID: SA11.2278
	City State Zip Code FAIRFIELD GLADE TN 38558-2880	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) HOWARD SEIDLER	Date of Receipt MM / DD / YYYY 10 / 23 / 2010
	Mailing Address 6860 NW 101ST TERR	Transaction ID: SA11.2656
	City State Zip Code PARKLAND FL 33076-2921	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. <b>C</b>	CONTRIBUTION
	Name of Employer Occupation SAXON INVESTMENT CORP. MONEY MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	6250.00
<b>TOTAL</b> 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 119 / 292  
(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)  
W. C. SENNETT

Mailing Address 6336 RED PINE LANE

City State Zip Code  
ERIE PA 16506-5019

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

Name of Employer Occupation  
KNOX MCLAUGHLIN GORNALL & SENN 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 / 2 6 / 2 0 1 0

**Transaction ID:** SA11.2730

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
VERNON SEVIER

Mailing Address 11122 LARK BROOK LANE

City State Zip Code  
HOUSTON TX 77065-3314

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

Name of Employer Occupation  
EXXON MOBIL CORPORATION ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

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

**Transaction ID:** SA11.2567

Amount of Each Receipt this Period  
750.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
VERNON SEVIER

Mailing Address 11122 LARK BROOK LANE

City State Zip Code  
HOUSTON TX 77065-3314

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

Name of Employer Occupation  
EXXON MOBIL CORPORATION ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

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

**Transaction ID:** SA11.3677

Amount of Each Receipt this Period  
500.00

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: (check only one)	PAGE 120 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL SHAW	Date of Receipt MM / DD / YYYY 10 / 14 / 2010
	Mailing Address 10815 MELVA RD	<b>Transaction ID:</b> SA11.1304
	City State Zip Code LA MESA CA 91941-5753	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation SELF-EMPLOYED CONTRACTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) STEPHEN SHERRILL	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 765 PARK AVENUE	<b>Transaction ID:</b> SA11.3459
	City State Zip Code NEW YORK NY 10021-4254	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation BRUCKMANN ROSSER SHERRILL & CO PRIVATE EQUITY INVESTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) THOMAS SIEBEL	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address P.O. BOX 240	<b>Transaction ID:</b> SA11.4113
	City State Zip Code PALO ALTO CA 94302-0240	Amount of Each Receipt this Period 250000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation FIRST VIRTUAL GROUP CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>265250.00</b>
<b>TOTAL</b> 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 121 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) HERBERT J. SIEGEL	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 190 E 72ND ST.	<b>Transaction ID:</b> SA11.4107
	City State Zip Code NEW YORK NY 10021-4370	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation NEWS AMERICA, INC. CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JEROME SIMON	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 3 E RIVERCREST DR	<b>Transaction ID:</b> SA11.2568
	City State Zip Code HOUSTON TX 77042-2513	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation NORTHERN TRUST EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) STEVEN SIMONOFF	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 15 TURTLE ROCK ROAD	<b>Transaction ID:</b> SA11.4269
	City State Zip Code WINDHAM NH 03087-2308	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation SELF-EMPLOYED SOFTWARE ENGINEER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5600.00
<b>TOTAL</b> 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 122 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) KEITH SMITH	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 2929 BLACKWOOD ROAD	<b>Transaction ID:</b> SA11.1968
	City State Zip Code DECATUR GA 30033-1011	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation FIRST CAPITAL ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MICHAEL SMITH	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 6134 WILLERS WAY	<b>Transaction ID:</b> SA11.1791
	City State Zip Code HOUSTON TX 77057-2806	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	Name of Employer Occupation SOURCE ROCK RESOURCES, IN-C. OIL AND GAS EXPLORATION	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL SMITH	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 3400 BENEVA RD. APT. 121	<b>Transaction ID:</b> SA11.4215
	City State Zip Code SARASOTA FL 34232-4603	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
	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>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> 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 123 / 292  
(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)  
RODNEY SMITH

Mailing Address 2450 N. FORBES AVE

City State Zip Code  
CLAREMONT CA 91711-1717

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

Name of Employer STRATECON INC      Occupation ECONOMIST

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

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

**Transaction ID:** SA11.1789

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
CLINT SPARKS

Mailing Address 31514 ORCHARD HILL LANE

City State Zip Code  
SPRING TX 77386-3689

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

Name of Employer PETROLEUM WHOLESALE, LP      Occupation ACCOUNTANT

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 / 2 5 / 2 0 1 0

**Transaction ID:** SA11.2629

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
TERRY F SPRAGENS

Mailing Address P.O. BOX 03133314

City State Zip Code  
SIOUX FALLS SD 57186-0001

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

Name of Employer SELF-EMPLOYED      Occupation MANAGER

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

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

**Transaction ID:** SA11.1313

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 124 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MR. DON C. SPRINGER	Date of Receipt MM / DD / YYYY 11 / 04 / 2010
	Mailing Address P.O. BOX 448	<b>Transaction ID:</b> SA11.3925
	City HUDSON State WI Zip Code 54016-0448	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer VIKING ELECTRONICS, INC.	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) SETH SPURLOCK	Date of Receipt MM / DD / YYYY 10 / 25 / 2010
	Mailing Address 1303 BOYD AVE	<b>Transaction ID:</b> SA11.2630
	City ATLANTA State GA Zip Code 30318-4136	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer BULK CHEMICAL SERVICES, LLC	Occupation EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOSEPH ST JOHN	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 74 PENDLETON DRIVE	<b>Transaction ID:</b> SA11.3471
	City EAST HARTFORD State CT Zip Code 06118-2825	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	<b>CONTRIBUTION</b>
Name of Employer HOBBYTYME DISTRIBUTORS INC.	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1000.00
<b>TOTAL</b> 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 125 / 292  
(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

<p><b>A.</b> Full Name (Last, First, Middle Initial) GLENN STALEY</p> <p>Mailing Address 4515 BOWSER #B</p> <p>City State Zip Code DALLAS TX 75219-2112</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation GLENN STALEY MANAGEMENT OWNER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">350.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 28 / 2010</p> <p><b>Transaction ID:</b> SA11.3680</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">100.00</span></p> <p>CONTRIBUTION</p>
--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p><b>B.</b> Full Name (Last, First, Middle Initial) WILBUR STANTON</p> <p>Mailing Address 2595 SPAULDING ROAD</p> <p>City State Zip Code CHRISTIANSBURG VA 24073-6445</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation RADFORD UNIVERSITY PROFESSOR</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 22 / 2010</p> <p><b>Transaction ID:</b> SA11.2571</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>CONTRIBUTION</p>
----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<p><b>C.</b> Full Name (Last, First, Middle Initial) WILLIS STARNES</p> <p>Mailing Address 3626 N. MACARTHUR SUITE 200</p> <p>City State Zip Code IRVING TX 75062-3643</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation SELF-EMPLOYED PHYSICIAN</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 28 / 2010</p> <p><b>Transaction ID:</b> SA11.3473</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>CONTRIBUTION</p>
-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------	------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">850.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 126 / 292  
(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)  
MS. PAULA STEINER

Mailing Address 865 ROSEWOOD DRIVE

City State Zip Code  
VILLA HILLS KY 41017-1333

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

Name of Employer Occupation  
S.S.T. CONSULTANTS CONSULTANT

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 / 2 7 / 2 0 1 0

Transaction ID: SA11.2791

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
LAURA STEMMLER

Mailing Address 611 LAWRENCE AVE

City State Zip Code  
WESTFIELD NJ 07090-3119

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

Name of Employer Occupation  
WOMENS HEALTH CENTER LSW, HOMEMAKER

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 8 / 2 0 1 0

Transaction ID: SA11.1969

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
DONALD G. STEWART

Mailing Address 32519 GREEN BEND CT.

City State Zip Code  
MAGNOLIA TX 77354-6858

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

Name of Employer Occupation  
STEWART BUILDERS OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

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

Transaction ID: SA11.4089

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1750.00**

**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 127 / 292  
(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)  
LEIGHTON STEWARD

Mailing Address 234 W BANDERA #121

City State Zip Code  
BOERNE TX 78006-2805

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  
MM / DD / YYYY  
10 / 21 / 2010

**Transaction ID:** SA11.4151

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JEFF STINSON

Mailing Address 33 MACGREGOR DRIVE

City State Zip Code  
STAMFORD CT 06902-1407

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

Name of Employer Occupation  
ALL AMERICAN GOURMET DELI, LLC BUSINESS OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 14 / 2010

**Transaction ID:** SA11.1804

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
TED STORLIE

Mailing Address 2701 KELLY AVE

City State Zip Code  
EXCELSIOR MN 55331-9534

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

Name of Employer Occupation  
WWS COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 24 / 2010

**Transaction ID:** SA11.2608

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00

**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 128 / 292  
(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

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)  
BEN STRAFUSS

Mailing Address 3150 SHEA ROAD

City State Zip Code  
COLLIERVILLE TN 38017-9726

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

Name of Employer Occupation  
CUMMINS MID-SOUTH LLC PRESIDENT

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 5 / 2 0 1 0

Transaction ID: SA11.1807

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
CHARLES STRAUCH

Mailing Address 49 N CALIBOGUE CAY ROAD

City State Zip Code  
HILTON HEAD SC 29928-2913

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

Name of Employer Occupation  
GA SERVICES, LLC OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

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

Transaction ID: SA11.4098

Amount of Each Receipt this Period  
15000.00

CONTRIBUTION

**C.**

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

Mailing Address 17802 SAWGRASS CIRCLE

City State Zip Code  
OMAHA NE 68136-1526

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

Name of Employer Occupation  
CONSTELLATION ENERGY SALES MANAGER

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 6 / 2 0 1 0

Transaction ID: SA11.1318

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **17000.00**

**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 129 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) MS. YOLANDE H. STRAWINSKI	Date of Receipt MM / DD / YYYY 10 / 27 / 2010
	Mailing Address 1130 SYLVAN PLACE	<b>Transaction ID:</b> SA11.2798
	City State Zip Code MONTEREY CA 93940-4903	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation NEW YORK LIFE INSURANCE CO EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) CHRIS T. SULLIVAN	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 3717 W NORTH B STREET	<b>Transaction ID:</b> SA11.4097
	City State Zip Code TAMPA FL 33609-1335	Amount of Each Receipt this Period 50000.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation DST RESTAURANT PARTNERS INC. MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) GREGORY SULLIVAN, MD	Date of Receipt MM / DD / YYYY 10 / 19 / 2010
	Mailing Address 257 UPPER MOUNTAIN AVE	<b>Transaction ID:</b> SA11.1970
	City State Zip Code UPPER MONTCLAIR NJ 07043-1015	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	<b>CONTRIBUTION</b>
	Name of Employer Occupation SELF-EMPLOYED PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	50800.00
<b>TOTAL</b> 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 130 / 292  
(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)  
STEVEN SUTTMAN

Mailing Address 1 INVERNESS DR E

City State Zip Code  
ENGLEWOOD CO 80112-5519

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

Name of Employer Occupation  
DYNAMIC SOLUTIONS INT'L PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2010

Transaction ID: SA11.1814

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ERIC SWANSON

Mailing Address 701 N. OAKHURST DR.

City State Zip Code  
BEVERLY HILLS CA 90210-3532

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 ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2010

Transaction ID: SA11.4008

Amount of Each Receipt this Period  
400.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JAY SWARTZWELTER

Mailing Address 8324 GREENWOOD DR.

City State Zip Code  
NIWOT CO 80503-7242

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

Name of Employer Occupation  
N/A DENTIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 24 / 2010

Transaction ID: SA11.2479

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

**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 131 / 292

(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)  
ROBERT SWARTZ

Mailing Address 4001 N NEW BRAUNFELS AVE.  
UNIT 602

City State Zip Code  
SAN ANTONIO TX 78209-6306

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 ▼ 539.00

Date of Receipt

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

Transaction ID: SA11.4255

Amount of Each Receipt this Period

439.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
PETER SWENSON

Mailing Address P.O. BOX 8

City State Zip Code  
TILDEN TX 78072-0008

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 1 / 1 5 / 2 0 1 0

Transaction ID: SA11.4206

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

**C.**

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

Mailing Address 528 21ST STREET

City State Zip Code  
MANHATTAN BEACH CA 90266-2202

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

Name of Employer Occupation  
GRANDVIEW CAPITAL MGMT FINANCIAL MANAGER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00

Date of Receipt

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

Transaction ID: SA11.1322

Amount of Each Receipt this Period

2000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) .....

4939.00

**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 132 / 292  
(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) BRIAN SZURA		Date of Receipt MM / DD / YYYY 10 / 24 / 2010
Mailing Address 206 FOX BRIAR LANE		Transaction ID: SA11.2609
City CARY	State NC	Zip Code 27518-8306
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer SELF	Occupation PHYSICIAN	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) BRADLEY TANK		Date of Receipt MM / DD / YYYY 10 / 31 / 2010
Mailing Address 6 INDIAN HILL RD		Transaction ID: SA11.3881
City WINNETKA	State IL	Zip Code 60093-3923
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer NEUBERGER BERMAN	Occupation INVESTOR	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

**C.**

Full Name (Last, First, Middle Initial) WILSON TAYLOR		Date of Receipt MM / DD / YYYY 10 / 18 / 2010
Mailing Address 1732 KIMBERTON ROAD		Transaction ID: SA11.4226
City PHOENIXVILLE	State PA	Zip Code 19460-1627
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
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 ▼ 25000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	28000.00
<b>TOTAL</b> 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 133 / 292  
(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 TAYLOR  
Mailing Address 6115 AVE. T  
City BROOKLYN State NY Zip Code 11234-5901  
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 / 14 / 2010  
Transaction ID: SA11.4256  
Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
PATRICK TERRANOVA  
Mailing Address 2235 CARMELITA DRIVE  
City SAN CARLOS State CA Zip Code 94070-2924  
FEC ID number of contributing federal political committee. **C**  
Name of Employer INTEL CORPORATION Occupation ATTORNEY  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 10 / 22 / 2010  
Transaction ID: SA11.2572  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
RICHARD THAYER  
Mailing Address 407 MERRYMEETING ROAD  
City NEW DURHAM State NH Zip Code 03855-2100  
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 / 17 / 2010  
Transaction ID: SA11.4014  
Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00  
**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 134 / 292  
(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)  
ROBERTA J THOMPSON

Mailing Address 2900 N GOVERNMENT WAY #321

City State Zip Code  
COEUR D ALENE ID 83815-3751

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 / 2 3 / 2 0 1 0

Transaction ID: SA11.2645

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.**

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

Mailing Address 246 PHEASANT LANE

City State Zip Code  
BLOOMINGDALE IL 60108-1336

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

Name of Employer Occupation  
ANCHOR PRODUCTS CO., INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

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

Transaction ID: SA11.3684

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**C.**

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

Mailing Address 246 PHEASANT LANE

City State Zip Code  
BLOOMINGDALE IL 60108-1336

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

Name of Employer Occupation  
ANCHOR PRODUCTS CO., INC. EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

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

Transaction ID: SA11.920

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

**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 135 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) WILLIAM TIEMANN	Date of Receipt MM / DD / YYYY 10 / 24 / 2010
	Mailing Address 2028 NAPOLEON AVENUE	Transaction ID: SA11.2610
	City State Zip Code NEW ORLEANS LA 70115-5508	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation REIN RADIOLOGY GROUP PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ROBERT TOMLINSON	Date of Receipt MM / DD / YYYY 10 / 24 / 2010
	Mailing Address 848 PROSPECT ST. UNIT E	Transaction ID: SA11.2611
	City State Zip Code LA JOLLA CA 92037-8202	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation DEL MAR PARTNERSHIP REAL ESTATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) CAROLINE TREADWAY	Date of Receipt MM / DD / YYYY 10 / 30 / 2010
	Mailing Address 1509 MONK RD.	Transaction ID: SA11.4268
	City State Zip Code GLADWYNE PA 19035-1316	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation CAROLINE TREADWAY FREELANCE WRITER/PHOTOGRAPHER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	2000.00
<b>TOTAL</b> 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 136 / 292
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) FRED TRESCA	Date of Receipt MM / DD / YYYY 10 / 22 / 2010
	Mailing Address 54 W. WINDWARD COVE	Transaction ID: SA11.2712
	City State Zip Code THE WOODLANDS TX 77381-4260	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation BRANTA LLC MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MING TSAI	Date of Receipt MM / DD / YYYY 10 / 28 / 2010
	Mailing Address 13472 HARPER DRIVE	Transaction ID: SA11.3686
	City State Zip Code SARATOGA CA 95070-5109	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation NAMES INCORPORATED PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) GILBERT TYLER	Date of Receipt MM / DD / YYYY 10 / 18 / 2010
	Mailing Address 29 HEATHER GLEN ROAD	Transaction ID: SA11.1976
	City State Zip Code GLASTONBURY CT 06033-4171	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	850.00
<b>TOTAL</b> 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 137 / 292  
(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)  
BRIAN TYREE  
Mailing Address 12459 N HWY 14  
City CEDAR CREST State NM Zip Code 87008-9719  
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 ▼ 300.00  
Date of Receipt 10 / 15 / 2010  
Transaction ID: SA11.1831  
Amount of Each Receipt this Period 200.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
BRIAN TYREE  
Mailing Address 12459 N HWY 14  
City CEDAR CREST State NM Zip Code 87008-9719  
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 ▼ 300.00  
Date of Receipt 10 / 28 / 2010  
Transaction ID: SA11.3688  
Amount of Each Receipt this Period 100.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
RON ULRICH  
Mailing Address 329 DANS HIGHWAY  
City NEW CANAAN State CT Zip Code 06840-2508  
FEC ID number of contributing federal political committee. **C**  
Name of Employer BREITHORN CAPITAL Occupation INVESTOR  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 10 / 28 / 2010  
Transaction ID: SA11.3690  
Amount of Each Receipt this Period 1000.00  
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 138 / 292  
(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)  
DR. JOHN VALENTIC

Mailing Address 1541 MEADOW DR

City State Zip Code  
UKIAH CA 95482-3678

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

Name of Employer SELF-EMPLOYED Occupation PHYSICIAN

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 8 / 2 0 1 0

Transaction ID: SA11.2054

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
RON VANETTES

Mailing Address 1596 N BRIAN STREET  
N BRIAN STREET

City State Zip Code  
ORANGE CA 92867-3406

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

Name of Employer SHARP FREIGHT Occupation SALES

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3692

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**C.**

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

Mailing Address 100 ISLAND DRIVE

City State Zip Code  
SLIDELL LA 70458-4212

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 Y  
1 0 / 2 7 / 2 0 1 0

Transaction ID: SA11.3760

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**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 139 / 292  
(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)  
JENNIFER WALSH

Mailing Address 1460 BERNAL AVENUE

City State Zip Code  
BURLINGAME CA 94010-5560

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

Name of Employer Occupation  
WOODRUFF-SAWYER & CO. CONSULTANT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
10 / 18 / 2010

**Transaction ID:** SA11.4228

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ROSEMARY WARD

Mailing Address 413 TRINITY CIRCLE

City State Zip Code  
SHREVEPORT LA 71106-2340

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 ▼ 1000.00

Date of Receipt  
MM / DD / YYYY  
10 / 18 / 2010

**Transaction ID:** SA11.2056

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
DANIEL WESTERBECK

Mailing Address 24 SURF SCOTER

City State Zip Code  
HILTON HEAD ISLAND SC 29928-5610

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  
MM / DD / YYYY  
10 / 19 / 2010

**Transaction ID:** SA11.1979

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 140 / 292

(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)  
DONALD WESTFALL

Mailing Address 1046 CENTRE STREET

City State Zip Code  
NEWTON MA 02459-1642

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 / 2 6 / 2 0 1 0

Transaction ID: SA11.3763

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**B.**

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

Mailing Address 7550 CODER RD

City State Zip Code  
MAUMEE OH 43537-9345

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

Name of Employer Occupation  
SELF-EMPLOYED REALTOR

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 / 2 8 / 2 0 1 0

Transaction ID: SA11.3888

Amount of Each Receipt this Period

250.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
JAMES WHIPPLE

Mailing Address 621 COLD SPRINGS

City State Zip Code  
PLACERVILLE CA 95667-9313

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

Name of Employer Occupation  
MARSHALL MEDICAL CENTER CEO

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 7 / 2 0 1 0

Transaction ID: SA11.4042

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 141 / 292  
(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 WHITTEN

Mailing Address 8720 E 105TH ST

City State Zip Code  
TULSA OK 74133-7057

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

Name of Employer Occupation  
NORDAM EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 17 / 2010

**Transaction ID:** SA11.4039

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JIM WIGGINS

Mailing Address 2072 TREMONT ROAD

City State Zip Code  
COLUMBUS OH 43221-4239

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

Name of Employer Occupation  
PHRONESIS PARTNERS, L.P. PORTFOLIO MANAGER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 14 / 2010

**Transaction ID:** SA11.1859

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
JAMES B. WILLIAMS

Mailing Address 6000 DENTON ROAD

City State Zip Code  
DALLAS TX 75235-6626

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

Name of Employer Occupation  
BC WILLIAMS BAKERY SERVICES OWNER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
M M / D D / Y Y Y Y  
10 / 18 / 2010

**Transaction ID:** SA11.4112

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 7600.00

**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 142 / 292  
(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

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) JAY WILLIAMS		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address BROADCASTING UNLIMITED, INC. 35 MAIN STREET		Transaction ID: SA11.1861
City WAYLAND	State MA	Zip Code 01778-5037
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer BROADCASTING UNLIMITED, INC.	Occupation PRESIDENT	CONTRIBUTION
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) JAY WILLIAMS JR		Date of Receipt MM / DD / YYYY 10 / 30 / 2010
Mailing Address 19 SHAW DR		Transaction ID: SA11.3702
City WAYLAND	State MA	Zip Code 01778-3213
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer BROADCASTING UNLIMITED, INC.	Occupation CONSULTANT	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) BRIAN WITT		Date of Receipt MM / DD / YYYY 10 / 19 / 2010
Mailing Address 5401 PINE ST.		Transaction ID: SA11.4218
City BELLAIRE	State TX	Zip Code 77401-4706
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer PROTECTIVE LIFE	Occupation SALESMAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	3600.00
<b>TOTAL</b> 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 143 / 292  
(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)  
JAMES WOODS

Mailing Address 16 SNIFFEN ROAD

City State Zip Code  
ARMONK NY 10504-2637

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 / 1 4 / 2 0 1 0

Transaction ID: SA11.1869

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
ALAN WRIGHT

Mailing Address 6212 WATERMAN AVE.

City State Zip Code  
ST. LOUIS MO 63130-4809

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 7 / 2 0 1 0

Transaction ID: SA11.3998

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.**

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

Mailing Address 1199 PACIFIC HWY #3701

City State Zip Code  
SAN DIEGO CA 92101-8426

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

Name of Employer Occupation  
SELF-EMPLOYED SALES

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 / 2 5 / 2 0 1 0

Transaction ID: SA11.2499

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 144 / 292  
(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) MARY WUTKE		Date of Receipt MM / DD / YYYY 10 / 21 / 2010
Mailing Address 6 SHEFFORD CIRCLE		Transaction ID: SA11.2546
City MADISON	State WI	Zip Code 53719-1415
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation BUSINESS OWNER	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) MARY WUTKE		Date of Receipt MM / DD / YYYY 11 / 01 / 2010
Mailing Address 6 SHEFFORD CIRCLE		Transaction ID: SA11.3889
City MADISON	State WI	Zip Code 53719-1415
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer SELF-EMPLOYED	Occupation BUSINESS OWNER	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) JOHN J. ZIMMER		Date of Receipt MM / DD / YYYY 10 / 14 / 2010
Mailing Address 1014 RIVER COURT		Transaction ID: SA11.1875
City MANITOWOC	State WI	Zip Code 54220-2948
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
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 ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> 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 145 / 292  
(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)  
JULIE ZIMMERMAN  
Mailing Address 1556 TOWER ROAD  
City WINNETKA State IL Zip Code 60093-1331  
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 / 15 / 2010  
Transaction ID: SA11.1365  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
ALLIANCE MGMT HOLDINGS III, L  
Mailing Address P.O. BOX 22027  
City TULSA State OK Zip Code 74121-2027  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 425000.00  
Date of Receipt 10 / 15 / 2010  
Transaction ID: SA11.4086  
Amount of Each Receipt this Period 425000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
AMERICAN METALS & COAL INT'L, INC.  
Mailing Address ONE ENERGY PLACE, STE. 1000  
City LATROBE State PA Zip Code 15650-9645  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 10000.00  
Date of Receipt 10 / 26 / 2010  
Transaction ID: SA11.4179  
Amount of Each Receipt this Period 10000.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 435250.00  
**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 146 / 292  
(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) DOUBLE D. FARMS		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address 652 W CROMWELL STE. 103		Transaction ID: SA11.4084
City FRESNO	State CA	Zip Code 93711-5715
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 10000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

**B.**

Full Name (Last, First, Middle Initial) FALCON TRUST		Date of Receipt MM / DD / YYYY 10 / 15 / 2010
Mailing Address P.O. BOX 50190		Transaction ID: SA11.4081
City CASPER	State WY	Zip Code 82605-0190
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

**C.**

Full Name (Last, First, Middle Initial) GLA FINANCIAL CORPORATION		Date of Receipt MM / DD / YYYY 10 / 26 / 2010
Mailing Address 949 SOUTH COAST DRIVE STE. 600		Transaction ID: SA11.4178
City COSTA MESA	State CA	Zip Code 92626-7734
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 25000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	60000.00
<b>TOTAL</b> 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 147 / 292  
(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)  
HANSEN RANCHES

Mailing Address P.O. BOX 398

City State Zip Code  
CORCORAN CA 93212-0398

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
10000.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2010

**Transaction ID:** SA11.4122

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
HUNTER ENGINEERING COMPANY

Mailing Address 11250 HUNTER DRIVE

City State Zip Code  
BRIDGETON MO 63044-2306

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  
MM / DD / YYYY  
10 / 22 / 2010

**Transaction ID:** SA11.4160

Amount of Each Receipt this Period  
50000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
JAWA

Mailing Address 15111 N PIMA ROAD  
STE. 200

City State Zip Code  
SCOTTSDALE AZ 85260-2779

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  
MM / DD / YYYY  
10 / 22 / 2010

**Transaction ID:** SA11.4159

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **85000.00**

**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 148 / 292  
(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)  
LOS GATOS TOMATO PRODUCTS

Mailing Address P.O. BOX 429

City State Zip Code  
HURON CA 93234-0429

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2010

Transaction ID: SA11.4121

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
OILFIELD MANAGEMENT, INC.

Mailing Address 333 SEASPRAY AVENUE

City State Zip Code  
PALM BEACH FL 33480-4230

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  
MM / DD / YYYY  
11 / 16 / 2010

Transaction ID: SA11.4071

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C.**

Full Name (Last, First, Middle Initial)  
PM CREATIVE CONSULTING, INC.

Mailing Address 3050 TAMARRON BLVD., #2110

City State Zip Code  
AUSTIN TX 78746-8001

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
10 / 19 / 2010

Transaction ID: SA11.4123

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► **11000.00**

**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 149 / 292
	(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) WEAVER POPCORN COMPANY, INC.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 2 2 / 2 0 1 0
Mailing Address 9850 WESTPOINT DRIVE STE. 100		Transaction ID: SA11.4158
City INDIANAPOLIS	State IN	Zip Code 46256-3365
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 75000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325000.00	

**B.**

Full Name (Last, First, Middle Initial) WOOLF ENTERPRISES		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 9 / 2 0 1 0
Mailing Address 18036 GALE AVENUE P.O. BOX 219		Transaction ID: SA11.4120
City HURON	State CA	Zip Code 93234-0219
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	80000.00
<b>TOTAL</b> This Period (last page this line number only) .....	3581499.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 150 / 292  
(check only one)

<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 checked="" 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)  
Olsen & Shuvalov

Mailing Address 1609 Shoal Creek Blvd.  
#203

City State Zip Code  
Austin TX 78701

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
98586.26

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

Transaction ID: 15.001

Amount of Each Receipt this Period  
52117.74

Vendor Refund, postage

**B.**

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

Mailing Address 1609 Shoal Creek Blvd.  
#203

City State Zip Code  
Austin TX 78701

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
98586.26

Date of Receipt  
M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 1 0

Transaction ID: 15.002

Amount of Each Receipt this Period  
46468.52

Vendor Refund, postage

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	98586.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	98586.26

# 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

A.	Full Name (Last, First, Middle Initial) Michael Britt	Transaction ID: 21.056 Date of Disbursement 11 / 04 / 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) Anne Byersdorfer	Transaction ID: 21.054 Date of Disbursement 11 / 04 / 2010
	Mailing Address 6211 Wedgewood Road	Amount of Each Disbursement this Period 6250.00
	City Bethesda State MD Zip Code 20817	
	Purpose of Disbursement Consulting, media	Category/ Type
	Candidate Name	
	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) Mary Clancy	Transaction ID: 21.194 Date of Disbursement 11 / 14 / 2010
	Mailing Address 1701 Esquire Lane	Amount of Each Disbursement this Period 16357.90
	City McLean State VA Zip Code 22101	
	Purpose of Disbursement Reimb., travel	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	27607.90
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 152 / 292

<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) Jonathan Collegio	Transaction ID: 21.002 Date of Disbursement 10 / 15 / 2010
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 3571.39
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll 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) ▼

B.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 21.030 Date of Disbursement 10 / 29 / 2010
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 2844.39
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll 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) Jonathan Collegio	Transaction ID: 21.079 Date of Disbursement 11 / 15 / 2010
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 3571.39
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	9987.17
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 153 / 292

<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><b>A.</b> Full Name (Last, First, Middle Initial) Andrew Finnan</p> <p>Mailing Address 4800 9th Street, N #6</p> <p>City Arlington State VA Zip Code 22203</p> <p>Purpose of Disbursement Consulting, media</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><b>Transaction ID:</b> 21.028</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <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><input type="text" value="3750.00"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 234 Justice Ct., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 21.005</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="5"/> / <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><input type="text" value="959.03"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 234 Justice Ct., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 21.036</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <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><input type="text" value="959.03"/></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)

PAGE 154 / 292

<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)  
Leslie Hagar

Transaction ID: 21.082  
Date of Disbursement

Mailing Address 234 Justice Ct., NE

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

City Washington State DC Zip Code 20002

Amount of Each Disbursement this Period

959.02
--------

Purpose of Disbursement  
Payroll

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Jennifer Harrington

Transaction ID: 21.071  
Date of Disbursement

Mailing Address 9465 W Post Road, #2048

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

City Las Vegas State NV Zip Code 89148

Amount of Each Disbursement this Period

4000.00
---------

Purpose of Disbursement  
Consulting, political

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Steven Law

Transaction ID: 21.006  
Date of Disbursement

Mailing Address 7726 Falstaff Road

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

City McLean State VA Zip Code 22102

Amount of Each Disbursement this Period

7193.11
---------

Purpose of Disbursement  
Payroll

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District: 00

SUBTOTAL of Disbursements This Page (optional) ..... ▶

12152.13
----------

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 155 / 292

<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><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Steven Law</p> <p>Mailing Address 7726 Falstaff Road</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 21.038</p> <p>Date of Disbursement 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 6558.10</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Steven Law</p> <p>Mailing Address 7726 Falstaff Road</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 21.083</p> <p>Date of Disbursement 11 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 7193.10</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Dave McGowan</p> <p>Mailing Address 374 Tierra St.</p> <p>City Henderson State NV Zip Code 89014</p> <p>Purpose of Disbursement Reimb. food &amp; bev. for volunteers</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><b>Transaction ID:</b> 21.025</p> <p>Date of Disbursement 10 / 28 / 2010</p> <p>Amount of Each Disbursement this Period 266.40</p>

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

14017.60

**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

A.	Full Name (Last, First, Middle Initial) Dave McGowan	Transaction ID: 21.048 Date of Disbursement 10 / 31 / 2010
	Mailing Address 374 Tierra St.	Amount of Each Disbursement this Period 220.11
	City Henderson State NV Zip Code 89014	
	Purpose of Disbursement Reimb. food & bev. for volunteers	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Chris McInerney	Transaction ID: 21.007 Date of Disbursement 10 / 15 / 2010
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3793.79
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District: 00	

C.	Full Name (Last, First, Middle Initial) Chris McInerney	Transaction ID: 21.040 Date of Disbursement 10 / 29 / 2010
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3793.80
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>7807.70</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 157 / 292

<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) Chris McInerney	Transaction ID: 21.084 Date of Disbursement 11 / 15 / 2010
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3793.79
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll 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) ▼

B.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 21.008 Date of Disbursement 10 / 15 / 2010
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 606.54
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll 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) Kelly Nallen	Transaction ID: 21.041 Date of Disbursement 10 / 29 / 2010
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 606.54
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5006.87
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 158 / 292

<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><b>A.</b> Full Name (Last, First, Middle Initial) Kelly Nallen</p> <p>Mailing Address 16 5th Street, SE #201</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 21.085</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <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><input type="text" value="606.54"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sam Olswanger</p> <p>Mailing Address 1691 Bryn Mawr Court</p> <p>City Germantown State TN Zip Code 22206</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 21.009</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="5"/> / <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><input type="text" value="1148.07"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Sam Olswanger</p> <p>Mailing Address 1691 Bryn Mawr Court</p> <p>City Germantown State TN Zip Code 22206</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 21.044</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <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><input type="text" value="1148.07"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="2902.68"/>
<b>TOTAL</b> 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 159 / 292

<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><b>A.</b> Full Name (Last, First, Middle Initial) Sam Olswanger</p> <p>Mailing Address 1691 Bryn Mawr Court</p> <p>City Germantown State TN Zip Code 22206</p> <p>Purpose of Disbursement Payroll</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><b>Transaction ID:</b> 21.086</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <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><input type="text" value="1148.07"/></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Kelsey Roberts</p> <p>Mailing Address 650 Whitney Ranch Dr. Apt. 4025</p> <p>City Henderson State NV Zip Code 89014</p> <p>Purpose of Disbursement Reimb. office supplies</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><b>Transaction ID:</b> 21.027</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <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><input type="text" value="24.71"/></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Kelsey Roberts</p> <p>Mailing Address 650 Whitney Ranch Dr. Apt. 4025</p> <p>City Henderson State NV Zip Code 89014</p> <p>Purpose of Disbursement Reimb. office supplies</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><b>Transaction ID:</b> 21.045</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <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><input type="text" value="24.19"/></p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p><input type="text" value="1196.97"/></p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	<p><input type="text"/></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 160 / 292

<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) Kelsey Roberts	Transaction ID: 21.050 Date of Disbursement 10 / 31 / 2010
	Mailing Address 650 Whitney Ranch Dr. Apt. 4025	Amount of Each Disbursement this Period 40.00
	City Henderson State NV Zip Code 89014	
	Purpose of Disbursement Reimb. travel, fuel	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) Christopher Yablonski	Transaction ID: 21.057 Date of Disbursement 11 / 04 / 2010
	Mailing Address 701 22nd Street South	Amount of Each Disbursement this Period 2000.00
	City Arlington State VA Zip Code 22202	
	Purpose of Disbursement Consulting, communications	Category/ Type
	Candidate Name	
	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) Christopher Yablonski	Transaction ID: 21.077 Date of Disbursement 11 / 15 / 2010
	Mailing Address 701 22nd Street South	Amount of Each Disbursement this Period 566.67
	City Arlington State VA Zip Code 22202	
	Purpose of Disbursement Consulting, communications	Category/ Type
	Candidate Name	
	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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	2606.67
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) Dustin Zvonek	Transaction ID: 21.064 Date of Disbursement 11 / 05 / 2010
	Mailing Address 9023 Apache Plane Drive Unit A	Amount of Each Disbursement this Period 4000.00
	City Parker State CO Zip Code 80134	
	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) ACCION International	Transaction ID: 21.012 Date of Disbursement 10 / 20 / 2010
	Mailing Address 1401 New York Avenue, NW Suite 500	Amount of Each Disbursement this Period 1050.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name	
	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) American Express	Transaction ID: SB21CCP.2 Date of Disbursement 10 / 25 / 2010
	Mailing Address PO Box 65048	Amount of Each Disbursement this Period 5167.50
	City Dallas State TX Zip Code 75265	
	Purpose of Disbursement Credit Card Payment (see memo entry)	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10217.50
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 162 / 292

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Walgreens Mailing Address 1217 22nd St., NW City Washington State DC Zip Code 20037 Purpose of Disbursement Gift Cards, Volunteers Candidate Name	Transaction ID: SC21CCD.8 Date of Disbursement 10 / 25 / 2010 Amount of Each Disbursement this Period 5167.50

[MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 65048 City Dallas State TX Zip Code 75265 Purpose of Disbursement Credit Card Payment (see memo entry) Candidate Name	Transaction ID: SB21CCP.3 Date of Disbursement 11 / 01 / 2010 Amount of Each Disbursement this Period 3163.50

<b>C.</b> Full Name (Last, First, Middle Initial) Walgreens Mailing Address 1217 22nd St., NW City Washington State DC Zip Code 20037 Purpose of Disbursement Gift Cards, Volunteers Candidate Name	Transaction ID: SC21CCD.9 Date of Disbursement 11 / 01 / 2010 Amount of Each Disbursement this Period 3163.50

[MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3163.50
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 163 / 292

<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) American Express	Transaction ID: SB21CCP.4 Date of Disbursement 11 / 09 / 2010
	Mailing Address PO Box 65048	Amount of Each Disbursement this Period 2099.00
	City Dallas State TX Zip Code 75265	
	Purpose of Disbursement Credit Card Payment (see memo entry)	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) Walgreens	Transaction ID: SC21CCD.10 Date of Disbursement 11 / 09 / 2010
	Mailing Address 1217 22nd St., NW	Amount of Each Disbursement this Period 2099.00
	City Washington State DC Zip Code 20037	
	Purpose of Disbursement Gift Cards, Volunteers	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.098 Date of Disbursement 10 / 28 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period 61406.08
	City Salt Lake City State UT Zip Code 84104	
	Purpose of Disbursement Mail, postage & 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) ▼

non-candidate

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	63505.08
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 164 / 292

<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><b>A.</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 Mail, 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><b>Transaction ID:</b> 21.100 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 20033.94</p>
<p><b>B.</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 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><b>Transaction ID:</b> 21.101 <b>Date of Disbursement</b> 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period -20033.94</p>
<p><b>C.</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 Mail, 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><b>Transaction ID:</b> 21.102 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 227694.22</p>

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

227694.22

**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 165 / 292

<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) Arena Communications	Transaction ID: 21.103 Date of Disbursement 10 / 19 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period -227694.22
	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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.104 Date of Disbursement 10 / 15 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period 137859.68
	City Salt Lake City State UT Zip Code 84104	
	Purpose of Disbursement Mail, Postage, Printing/Production	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) Arena Communications	Transaction ID: 21.105 Date of Disbursement 10 / 18 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period -137859.68
	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	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	-227694.22
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 166 / 292

<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><b>A.</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 Mail, Postage, Printing/Production</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><b>Transaction ID:</b> 21.106</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 140874.62</p>
<p><b>B.</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 See Schedule E</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><b>Transaction ID:</b> 21.107</p> <p>Date of Disbursement 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period -140874.62</p>
<p><b>C.</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 Mail, Postage, Printing/Production</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><b>Transaction ID:</b> 21.108</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 53134.10</p>

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

53134.10

**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 167 / 292

<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) Arena Communications	Transaction ID: 21.109 Date of Disbursement																			
	Mailing Address 1780 W Sequoia Circle	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	1	8	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	1	8	/	2	0	1	0												
	City State Zip Code Salt Lake City UT 84104	Amount of Each Disbursement this Period																			
	Purpose of Disbursement See Schedule E	<table border="1"><tr><td>-53134.10</td></tr></table>	-53134.10																		
-53134.10																					
	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) Arena Communications	Transaction ID: 21.133 Date of Disbursement																			
	Mailing Address 1780 W Sequoia Circle	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	0	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	0	/	2	0	1	0												
	City State Zip Code Salt Lake City UT 84104	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Mail, Postage, Printing/Production	<table border="1"><tr><td>9255.56</td></tr></table>	9255.56																		
9255.56																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.134 Date of Disbursement																			
	Mailing Address 1780 W Sequoia Circle	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>2</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	2	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	2	/	2	0	1	0												
	City State Zip Code Salt Lake City UT 84104	Amount of Each Disbursement this Period																			
	Purpose of Disbursement See Schedule E	<table border="1"><tr><td>-9255.56</td></tr></table>	-9255.56																		
-9255.56																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>-53134.10</td></tr></table>	-53134.10
-53134.10		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

**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 168 / 292

<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) Arena Communications	Transaction ID: 21.135 Date of Disbursement 10 / 20 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period 75583.80
	City Salt Lake City State UT Zip Code 84104	
	Purpose of Disbursement Mail, 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) ▼

B.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.136 Date of Disbursement 10 / 22 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period -75583.80
	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) ▼

C.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.137 Date of Disbursement 10 / 20 / 2010
	Mailing Address 1780 W Sequoia Circle	Amount of Each Disbursement this Period 249934.92
	City Salt Lake City State UT Zip Code 84104	
	Purpose of Disbursement Mail, 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	249934.92
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 169 / 292

<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) Arena Communications	Transaction ID: 21.138 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="22"/> <input type="text" value="2"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	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="-249934.92"/>
	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: 21.139 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	City Salt Lake City State UT Zip Code 84104	Amount of Each Disbursement this Period
	Purpose of Disbursement Mail, Postage, Printing/Production	<input type="text" value="38376.96"/>
	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: 21.140 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="22"/> <input type="text" value="2"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	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="-38376.96"/>
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="-249934.92"/>
<b>TOTAL</b> 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)

<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) Arena Communications	Transaction ID: 21.141 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="20"/> / <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 Mail, Postage, Printing/Production	<input type="text" value="88532.86"/>
	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) Arena Communications	Transaction ID: 21.142 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="21"/> / <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="-88532.86"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.143 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="20"/> / <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 Mail, Postage, Printing/Production	<input type="text" value="129529.88"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="129529.88"/>
<b>TOTAL</b> 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 171 / 292

<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><b>A.</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 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><b>Transaction ID:</b> 21.144 <b>Date of Disbursement</b> 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period -129529.88</p>
<p><b>B.</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 Mail, 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><b>Transaction ID:</b> 21.145 <b>Date of Disbursement</b> 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 67963.76</p>
<p><b>C.</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 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><b>Transaction ID:</b> 21.146 <b>Date of Disbursement</b> 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period -67963.76</p>

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

-129529.88

**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

A.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.175 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="25"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Salt Lake City State UT Zip Code 84104	Amount of Each Disbursement this Period
	Purpose of Disbursement Mail, Postage, Printing/Production	<input type="text" value="3719.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.176 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="28"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/> <input type="text" value="0"/>
	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="-3719.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Arena Communications	Transaction ID: 21.177 Date of Disbursement
	Mailing Address 1780 W Sequoia Circle	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="25"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Salt Lake City State UT Zip Code 84104	Amount of Each Disbursement this Period
	Purpose of Disbursement Mail, Printing/Production	<input type="text" value="3719.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3719.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

# 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><b>A.</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 See Schedule E</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><b>Transaction ID:</b> 21.178</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <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="-3719.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Bearcom</p> <p>Mailing Address 5905 S Decatur #13</p> <p>City Las Vegas State NV Zip Code 89118</p> <p>Purpose of Disbursement Phone Rental</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><b>Transaction ID:</b> 21.013</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> / <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="4578.10"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Bearcom</p> <p>Mailing Address 5905 S Decatur #13</p> <p>City Las Vegas State NV Zip Code 89118</p> <p>Purpose of Disbursement Phone Rental</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><b>Transaction ID:</b> 21.088</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <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="216.20"/></p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1075.30"/>
<b>TOTAL</b> 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)

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Black Rock Group, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Consulting, political Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21.055 Date of Disbursement 11 / 04 / 2010	Amount of Each Disbursement this Period 12644.00
<b>B.</b>	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 <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21.066 Date of Disbursement 11 / 14 / 2010	Amount of Each Disbursement this Period 8246.09
<b>C.</b>	Full Name (Last, First, Middle Initial) Boston Market <hr/> Mailing Address 8507 E Arapahoe Road <hr/> City Greenwood Village State CO Zip Code 80112 <hr/> Purpose of Disbursement Food & bev., volunteers Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21.047 Date of Disbursement 10 / 30 / 2010	Amount of Each Disbursement this Period 600.52

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

21490.61

**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 175 / 292

<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)  
Carefirst, Blue Cross Blue Shield

Transaction ID: 21.067

Date of Disbursement

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

Mailing Address PO Box 79749

Amount of Each Disbursement this Period

2978.00
---------

City Baltimore State MD Zip Code 21279-0749

Purpose of Disbursement  
Health Insurance

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District: 00

B.

Full Name (Last, First, Middle Initial)  
Chatham Light Media, LLC

Transaction ID: 21.163

Date of Disbursement

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

Mailing Address PO Box 1330

Amount of Each Disbursement this Period

15000.00
----------

City Stowe State VT Zip Code 05672

Purpose of Disbursement  
TV/Media Production, ad never aired

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
Cherry Village Asian Grill

Transaction ID: 21.200

Date of Disbursement

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

Mailing Address 17001 East Lincoln Avenue

Amount of Each Disbursement this Period

508.07
--------

City Parker State CO Zip Code 80134

Purpose of Disbursement  
Food & bev., volunteers

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

18486.07
----------

**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><b>A.</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 Contribution processing</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><b>Transaction ID:</b> 21.068</p> <p>Date of Disbursement 11 / 14 / 2010</p> <p>Amount of Each Disbursement this Period 902.80</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Connection Strategies</p> <p>Mailing Address PO Box 2192</p> <p>City Arlington State VA Zip Code 22202</p> <p>Purpose of Disbursement Conference Calls</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><b>Transaction ID:</b> 21.089</p> <p>Date of Disbursement 11 / 22 / 2010</p> <p>Amount of Each Disbursement this Period 905.12</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Connection Strategies</p> <p>Mailing Address PO Box 2192</p> <p>City Arlington State VA Zip Code 22202</p> <p>Purpose of Disbursement Voter Contact, non-candidate</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><b>Transaction ID:</b> 21.095</p> <p>Date of Disbursement 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 21675.65</p>

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

**23483.57**

**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

A.	Full Name (Last, First, Middle Initial) Connection Strategies	Transaction ID: 21.097 Date of Disbursement
	Mailing Address PO Box 2192	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="21"/> <input type="text" value="1"/> / <input type="text" value="20"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Arlington State VA Zip Code 22202	Amount of Each Disbursement this Period
	Purpose of Disbursement Voter contact, non-candidate	<input type="text" value="59421.10"/>
	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) Craft Media Digital	Transaction ID: 21.014 Date of Disbursement
	Mailing Address 11 D Street, SE	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Web video, non-candidate	<input type="text" value="750.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: 21.110 Date of Disbursement
	Mailing Address 66 Canal Center Plaza Ste. 555	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="15"/> <input type="text" value="5"/> / <input type="text" value="20"/> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Deposit, Media Placement	<input type="text" value="789076.70"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="849247.80"/>
<b>TOTAL</b> 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 178 / 292

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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>Transaction ID:</b> 21.111 Date of Disbursement 10 / 19 / 2010 <hr/> Amount of Each Disbursement this Period -789076.70
<b>B.</b>	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Deposit, Media Placement Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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>Transaction ID:</b> 21.112 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period 770144.20
<b>C.</b>	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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>Transaction ID:</b> 21.113 Date of Disbursement 10 / 19 / 2010 <hr/> Amount of Each Disbursement this Period -770144.20

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

-789076.70

**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 179 / 292

<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><b>A.</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><b>Transaction ID:</b> 21.120 <b>Date of Disbursement</b> 10 / 18 / 2010</p> <p>Amount of Each Disbursement this Period 148412.06</p>
<p><b>B.</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><b>Transaction ID:</b> 21.121 <b>Date of Disbursement</b> 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -148412.06</p>
<p><b>C.</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><b>Transaction ID:</b> 21.122 <b>Date of Disbursement</b> 10 / 14 / 2010</p> <p>Amount of Each Disbursement this Period -75450.00</p> <p>Original disb. reported on pre-general filing</p>

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

-75450.00

**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 180 / 292

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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>Transaction ID:</b> 21.123 Date of Disbursement 10 / 15 / 2010 <hr/> Amount of Each Disbursement this Period -394990.00 <hr/> Original disb. reported on pre-general filing
<b>B.</b>	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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>Transaction ID:</b> 21.124 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period -138280.00 <hr/> Original disb. reported on pre-general filing
<b>C.</b>	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name <span style="float: right;">Category/ Type</span> <hr/> 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>Transaction ID:</b> 21.125 Date of Disbursement 10 / 14 / 2010 <hr/> Amount of Each Disbursement this Period -669757.50 <hr/> Original disb. reported on pre-general filing

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-1203027.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 181 / 292

<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) Crossroads Media, LLC	Transaction ID: 21.126 Date of Disbursement 10 / 14 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period -250248.01
	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	Original disb. reported on pre-general filing
	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: 21.127 Date of Disbursement 10 / 15 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period -92750.00
	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	Original disb. reported on pre-general filing
	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: 21.171 Date of Disbursement 10 / 22 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period 645988.95
	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	Original disb. reported on pre-general filing
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	302990.94
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 182 / 292

<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

<b>A.</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 See Schedule E 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>Transaction ID:</b> 21.172 Date of Disbursement 10 / 26 / 2010  Amount of Each Disbursement this Period -645988.95	
<b>B.</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  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 21.188 Date of Disbursement 10 / 27 / 2010  Amount of Each Disbursement this Period 140125.00	
<b>C.</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 See Schedule E 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>Transaction ID:</b> 21.189 Date of Disbursement 10 / 28 / 2010  Amount of Each Disbursement this Period -140125.00	

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

-645988.95

**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 183 / 292

<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 and 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

<b>A.</b>	Full Name (Last, First, Middle Initial) CSI Mailing Address 205 W Jefferson St. City Falls Church State VA Zip Code 22046 Purpose of Disbursement Signage 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>Transaction ID:</b> 21.060 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 1 / 0 5 / 2 0 1 0	Amount of Each Disbursement this Period 644.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Department of Employment Services Mailing Address PO Box 9664 City Washington State DC Zip Code 20090 Purpose of Disbursement Payroll Taxes 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>Transaction ID:</b> 21.031 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0	Amount of Each Disbursement this Period 655.74
<b>C.</b>	Full Name (Last, First, Middle Initial) Direct Dial Mailing Address 107 South West Street PMB 499 City Alexandria State VA Zip Code 22314 Purpose of Disbursement Texting 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>Transaction ID:</b> 21.147 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 0 / 2 0 / 2 0 1 0	Amount of Each Disbursement this Period 74602.90

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>75902.64</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 184 / 292

<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) Direct Dial	Transaction ID: 21.148 Date of Disbursement
	Mailing Address 107 South West Street PMB 499	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="22"/> <input type="text" value="2"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement See Schedule E	<input type="text" value="-74602.90"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Direct Dial	Transaction ID: 21.149 Date of Disbursement
	Mailing Address 107 South West Street PMB 499	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="0"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Texting	<input type="text" value="132459.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Direct Dial	Transaction ID: 21.150 Date of Disbursement
	Mailing Address 107 South West Street PMB 499	<input type="text" value="10"/> <input type="text" value="0"/> / <input type="text" value="22"/> <input type="text" value="2"/> / <input type="text" value="20"/> <input type="text" value="10"/> <input type="text" value="0"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement See Schedule E	<input type="text" value="-132459.60"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="-74602.90"/>
<b>TOTAL</b> 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)

<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) DL&C	Transaction ID: 21.069
	Mailing Address 2440 N Edgewood St.	Date of Disbursement 11 / 14 / 2010
	City Arlington State VA Zip Code 22207	Amount of Each Disbursement this Period 632.25
	Purpose of Disbursement Consulting, Donor Development	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) DL&C	Transaction ID: 21.080
	Mailing Address 2440 N Edgewood St.	Date of Disbursement 11 / 15 / 2010
	City Arlington State VA Zip Code 22207	Amount of Each Disbursement this Period 7500.00
	Purpose of Disbursement Consulting, Donor Development	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) Emotive, LLC	Transaction ID: 21.164
	Mailing Address 2800 Shirlington Road Ste. 901	Date of Disbursement 10 / 21 / 2010
	City Arlington State VA Zip Code 22206	Amount of Each Disbursement this Period 92950.00
	Purpose of Disbursement Internet Fundraising, non-candidate	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>101082.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 186 / 292

<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><b>A.</b> 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 Internet Fundraising, non-candidate</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><b>Transaction ID:</b> 21.183 <b>Date of Disbursement</b> 10 / 26 / 2010</p> <p>Amount of Each Disbursement this Period 13013.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Enterprise-CO</p> <p>Mailing Address 2255 Broadway</p> <p>City Denver State CO Zip Code 80205</p> <p>Purpose of Disbursement Travel, car rental</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><b>Transaction ID:</b> 21.201 <b>Date of Disbursement</b> 11 / 03 / 2010</p> <p>Amount of Each Disbursement this Period 3908.16</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) FedEx Office</p> <p>Mailing Address 942 S Shady Grove Road</p> <p>City Memphis State TN Zip Code 38120</p> <p>Purpose of Disbursement Shipping</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><b>Transaction ID:</b> 21.202 <b>Date of Disbursement</b> 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 293.95</p>

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

17215.11

**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 187 / 292

<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. Financial Agent	Full Name (Last, First, Middle Initial)	Transaction ID: 21.004	
	Mailing Address PO Box 970030	Date of Disbursement 10 / 15 / 2010	
	City St. Louis State MO Zip Code 63197	Amount of Each Disbursement this Period 5371.82	
	Purpose of Disbursement Payroll Taxes	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: 00		

B. Financial Agent	Full Name (Last, First, Middle Initial)	Transaction ID: 21.032	
	Mailing Address PO Box 970030	Date of Disbursement 10 / 29 / 2010	
	City St. Louis State MO Zip Code 63197	Amount of Each Disbursement this Period 5371.82	
	Purpose of Disbursement Payroll Taxes	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: 00		

C. Financial Agent	Full Name (Last, First, Middle Initial)	Transaction ID: 21.081	
	Mailing Address PO Box 970030	Date of Disbursement 11 / 15 / 2010	
	City St. Louis State MO Zip Code 63197	Amount of Each Disbursement this Period 5371.84	
	Purpose of Disbursement Payroll Taxes	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: 00		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>16115.48</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) FLS Connect	Transaction ID: 21.015 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste. 270	<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2010"/>
	City St. Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Purchase, iPad and iTouch	<input type="text" value="27659.60"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 21.033 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste. 270	<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2010"/>
	City St. Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Purchase, iPad and iTouch	<input type="text" value="4154.46"/>
	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) FLS Connect	Transaction ID: 21.034 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste. 270	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City St. Paul State MN Zip Code 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Purchase, iPad and iTouch	<input type="text" value="3861.40"/>
	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) ▼

**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)

PAGE 189 / 292

<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) FLS Connect	Transaction ID: 21.061 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste. 270	<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Conference calls	<input type="text" value="734.99"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 21.090 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste. 270	<input type="text" value="11"/> / <input type="text" value="22"/> / <input type="text" value="2010"/>
	City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Conference Calls	<input type="text" value="250.00"/>
	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) Giuseppe's Bar and Grill	Transaction ID: 21.035 Date of Disbursement
	Mailing Address 6065 S Durango Road	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2010"/>
	City State Zip Code Las Vegas NV 89113	Amount of Each Disbursement this Period
	Purpose of Disbursement Food & bev., volunteers	<input type="text" value="329.71"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="1314.70"/>
<b>TOTAL</b> 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)

<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><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Grassroots Outreach, LLC</p> <p>Mailing Address 80 E Rio Salado Parkway Ste. 814</p> <p>City Tempe State AZ Zip Code 85281</p> <p>Purpose of Disbursement GOTV/Voter Contact</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><b>Transaction ID:</b> 21.179</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 350000.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Grassroots Outreach, LLC</p> <p>Mailing Address 80 E Rio Salado Parkway Ste. 814</p> <p>City Tempe State AZ Zip Code 85281</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><b>Transaction ID:</b> 21.180</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period -350000.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Grassroots Outreach, LLC</p> <p>Mailing Address 80 E Rio Salado Parkway Ste. 814</p> <p>City Tempe State AZ Zip Code 85281</p> <p>Purpose of Disbursement Phone Call/Printing/Lit.Distribution</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><b>Transaction ID:</b> 21.190</p> <p>Date of Disbursement 10 / 27 / 2010</p> <p>Amount of Each Disbursement this Period 300000.00</p>

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

300000.00

**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 191 / 292

<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

<b>A.</b>	Full Name (Last, First, Middle Initial) Grassroots Outreach, LLC  Mailing Address 80 E Rio Salado Parkway Ste. 814  City Tempe State AZ Zip Code 85281  Purpose of Disbursement See Schedule E Candidate Name <span style="float: right;">Category/ Type</span>  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>Transaction ID:</b> 21.191 <b>Date of Disbursement</b> 10 / 28 / 2010  Amount of Each Disbursement this Period -300000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) Hackney & Hackney  Mailing Address 1407 W 31st Avenue Ste. 100  City Anchorage State AK Zip Code 99503  Purpose of Disbursement TV/Media Production, ad never aired Candidate Name <span style="float: right;">Category/ Type</span>  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>Transaction ID:</b> 21.165 <b>Date of Disbursement</b> 10 / 21 / 2010  Amount of Each Disbursement this Period 11927.50
<b>C.</b>	Full Name (Last, First, Middle Initial) Hathaway Strategies, LLC  Mailing Address 740 E 52nd Street Ste. 10  City Indianapolis State IN Zip Code 46205  Purpose of Disbursement Consulting, political Candidate Name <span style="float: right;">Category/ Type</span>  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>Transaction ID:</b> 21.021 <b>Date of Disbursement</b> 10 / 27 / 2010  Amount of Each Disbursement this Period 11250.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-276822.50</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) Hathaway Strategies, LLC  Mailing Address 740 E 52nd Street Ste. 10  City Indianapolis State IN Zip Code 46205  Purpose of Disbursement Consulting, political 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) ▼	Transaction ID: 21.091 Date of Disbursement 11 / 22 / 2010  Amount of Each Disbursement this Period 3750.00
B.	Full Name (Last, First, Middle Initial) Holiday Inn Express-DV  Mailing Address 7380 Clinton Street S  City Englewood State CO Zip Code 80112  Purpose of Disbursement Lodging 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) ▼	Transaction ID: 21.037 Date of Disbursement 10 / 29 / 2010  Amount of Each Disbursement this Period 12742.95
C.	Full Name (Last, First, Middle Initial) HoltzmanVogel, PLLC  Mailing Address 45 North Hill Drive Ste. 100  City Warrenton State VA Zip Code 20186  Purpose of Disbursement Legal Fees 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) ▼	Transaction ID: 21.092 Date of Disbursement 11 / 22 / 2010  Amount of Each Disbursement this Period 50000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>66492.95</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 193 / 292

<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) iContribute	Transaction ID: 21.197 Date of Disbursement 11 / 22 / 2010
	Mailing Address PO Box 8522	Amount of Each Disbursement this Period 3392.16
	City Falls Church State VA Zip Code 22041	
	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: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jimmy John's	Transaction ID: 21.203 Date of Disbursement 11 / 01 / 2010
	Mailing Address 110 16th Street	Amount of Each Disbursement this Period 367.47
	City Denver State CO Zip Code 80205	
	Purpose of Disbursement Food & bev., volunteers	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Kintera Blackbud	Transaction ID: 21.198 Date of Disbursement 11 / 22 / 2010
	Mailing Address 2000 Daniel Island Drive	Amount of Each Disbursement this Period 20189.97
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	23949.60
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 194 / 292

<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><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Lexis Nexis</p> <p>Mailing Address PO Box 7247-7090</p> <p>City Philadelphia State PA Zip Code 19170-7090</p> <p>Purpose of Disbursement Subscriptions</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><b>Transaction ID:</b> 21.072</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">954.00</td> </tr> </table> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	4	/	2	0	1	0	954.00
M	M	/	D	D	/	Y	Y	Y	Y													
1	1	/	1	4	/	2	0	1	0													
954.00																						
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Maggianos</p> <p>Mailing Address 7401 S Clinton Street</p> <p>City Englewood State CO Zip Code 80112</p> <p>Purpose of Disbursement Food &amp; bev., volunteers</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><b>Transaction ID:</b> 21.039</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">313.57</td> </tr> </table> <p>Category/Type</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	9	/	2	0	1	0	313.57
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	9	/	2	0	1	0													
313.57																						
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Majority Strategies</p> <p>Mailing Address 135 Professional Drive Ste. 104</p> <p>City Ponte Vedra Beach State FL Zip Code 32082</p> <p>Purpose of Disbursement Mail, postage/printing &amp; production</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><b>Transaction ID:</b> 21.096</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">46468.52</td> </tr> </table> <p>Category/Type</p> <p>non-candidate</p>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	0	/	2	0	1	0	46468.52
M	M	/	D	D	/	Y	Y	Y	Y													
1	0	/	2	0	/	2	0	1	0													
46468.52																						

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

<b>47736.09</b>
-----------------

**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 195 / 292

<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. Majority Strategies	Full Name (Last, First, Middle Initial)	Transaction ID: 21.099
	Mailing Address 135 Professional Drive Ste. 104	Date of Disbursement 10 / 28 / 2010
	City Ponte Vedra Beach State FL Zip Code 32082	Amount of Each Disbursement this Period 83082.94
	Purpose of Disbursement Mail, postage & production	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	non-candidate
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B. Majority Strategies	Full Name (Last, First, Middle Initial)	Transaction ID: 21.151
	Mailing Address 135 Professional Drive Ste. 104	Date of Disbursement 10 / 20 / 2010
	City Ponte Vedra Beach State FL Zip Code 32082	Amount of Each Disbursement this Period 63303.15
	Purpose of Disbursement Mail, postage/printing & production	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. Majority Strategies	Full Name (Last, First, Middle Initial)	Transaction ID: 21.152
	Mailing Address 135 Professional Drive Ste. 104	Date of Disbursement 10 / 25 / 2010
	City Ponte Vedra Beach State FL Zip Code 32082	Amount of Each Disbursement this Period -63303.15
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	83082.94
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 196 / 292

<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

<b>A.</b> Full Name (Last, First, Middle Initial) Majority Strategies	Transaction ID: 21.153 Date of Disbursement 10 / 20 / 2010
	Mailing Address 135 Professional Drive Ste. 104 City State Zip Code Ponte Vedra Beach FL 32082 Purpose of Disbursement Mail, postage/printing & production 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:
Amount of Each Disbursement this Period 85834.41	

<b>B.</b> Full Name (Last, First, Middle Initial) Majority Strategies	Transaction ID: 21.154 Date of Disbursement 10 / 22 / 2010
	Mailing Address 135 Professional Drive Ste. 104 City State Zip Code Ponte Vedra Beach FL 32082 Purpose of Disbursement See Schedule E 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:
Amount of Each Disbursement this Period -85834.41	

<b>C.</b> Full Name (Last, First, Middle Initial) MAXimum Compliance, LLC	Transaction ID: 21.073 Date of Disbursement 11 / 14 / 2010
	Mailing Address 4703 Woodway Lane, NW City State Zip Code Washington DC 20016 Purpose of Disbursement Bookkeeping and Compliance 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:
Amount of Each Disbursement this Period 1542.21	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1542.21
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 197 / 292

<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) McCarthy Marcus Hennings, Ltd.	Transaction ID: 21.166 Date of Disbursement 10 / 21 / 2010
	Mailing Address 1850 M Street, NW Ste. 235	Amount of Each Disbursement this Period 14916.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement TV/Media Production	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) McCarthy Marcus Hennings, Ltd.	Transaction ID: 21.167 Date of Disbursement 10 / 22 / 2010
	Mailing Address 1850 M Street, NW Ste. 235	Amount of Each Disbursement this Period -14916.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement See Schedule E	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) McKenna & Associates	Transaction ID: 21.062 Date of Disbursement 11 / 05 / 2010
	Mailing Address 2321 North Kentucky St.	Amount of Each Disbursement this Period 12500.00
	City Arlington State VA Zip Code 22205	
	Purpose of Disbursement Consulting, Donor Development	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 12500.00

**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 198 / 292

<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) MDC & Associates, Inc.	Transaction ID: 21.058 Date of Disbursement 11 / 04 / 2010
	Mailing Address 1701 Esquire Lane	Amount of Each Disbursement this Period 5000.00
	City McLean State VA Zip Code 22101	
	Purpose of Disbursement Bookkeeping & Compliance	Category/Type
	Candidate Name	
	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) ▼

B.	Full Name (Last, First, Middle Initial) MDC & Associates, Inc.	Transaction ID: 21.094 Date of Disbursement 11 / 22 / 2010
	Mailing Address 1701 Esquire Lane	Amount of Each Disbursement this Period 207.61
	City McLean State VA Zip Code 22101	
	Purpose of Disbursement Reimb. travel, parking, shipping	Category/Type
	Candidate Name	
	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) Mentzer Media Services, Inc.	Transaction ID: 21.114 Date of Disbursement 10 / 15 / 2010
	Mailing Address 600 Fairmont Avenue Ste. 306	Amount of Each Disbursement this Period 50371.20
	City Towson State MD Zip Code 21286	
	Purpose of Disbursement Deposit, Media Placement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	55578.81
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 199 / 292

<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

<b>A.</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 See Schedule E Candidate Name <span style="float: right;">Category/Type</span>  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:	Transaction ID: 21.115 Date of Disbursement 10 / 19 / 2010  Amount of Each Disbursement this Period -50371.20
<b>B.</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 See Schedule E Candidate Name <span style="float: right;">Category/Type</span>  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:	Transaction ID: 21.128 Date of Disbursement 10 / 15 / 2010  Amount of Each Disbursement this Period -202400.00  Original disb. reported on pre-general filing
<b>C.</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 See Schedule E Candidate Name <span style="float: right;">Category/Type</span>  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:	Transaction ID: 21.129 Date of Disbursement 10 / 15 / 2010  Amount of Each Disbursement this Period -177450.00  Original disb. reported on pre-general filing

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-430221.20
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

PAGE 200 / 292

<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) Mentzer Media Services, Inc.	Transaction ID: 21.155 Date of Disbursement
	Mailing Address 600 Fairmont Avenue Ste. 306	<input type="text" value="10"/> <input type="text" value="20"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Towson State MD Zip Code 21286	Amount of Each Disbursement this Period
	Purpose of Disbursement Deposit, Media Placement	<input type="text" value="249799.08"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.	Transaction ID: 21.156 Date of Disbursement
	Mailing Address 600 Fairmont Avenue Ste. 306	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Towson State MD Zip Code 21286	Amount of Each Disbursement this Period
	Purpose of Disbursement See Schedule E	<input type="text" value="-249799.08"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.	Transaction ID: 21.173 Date of Disbursement
	Mailing Address 600 Fairmont Avenue Ste. 306	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Towson State MD Zip Code 21286	Amount of Each Disbursement this Period
	Purpose of Disbursement Deposit, Media Placement	<input type="text" value="208165.92"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

**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)

PAGE 201 / 292

<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) Mentzer Media Services, Inc.	Transaction ID: 21.174 Date of Disbursement 10 / 28 / 2010
	Mailing Address 600 Fairmont Avenue Ste. 306	Amount of Each Disbursement this Period -208165.92
	City Towson State MD Zip Code 21286	
	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) Mentzer Media Services, Inc.	Transaction ID: 21.181 Date of Disbursement 10 / 25 / 2010
	Mailing Address 600 Fairmont Avenue Ste. 306	Amount of Each Disbursement this Period 48928.00
	City Towson State MD Zip Code 21286	
	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) Mentzer Media Services, Inc.	Transaction ID: 21.182 Date of Disbursement 10 / 27 / 2010
	Mailing Address 600 Fairmont Avenue Ste. 306	Amount of Each Disbursement this Period -48928.00
	City Towson State MD Zip Code 21286	
	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>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-208165.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) Mentzer Media Services, Inc.	Transaction ID: 21.184 Date of Disbursement 10 / 26 / 2010
	Mailing Address 600 Fairmont Avenue Ste. 306	Amount of Each Disbursement this Period 240240.00
	City Towson State MD Zip Code 21286	
	Purpose of Disbursement Deposit, Media Placement	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.	Transaction ID: 21.185 Date of Disbursement 10 / 27 / 2010
	Mailing Address 600 Fairmont Avenue Ste. 306	Amount of Each Disbursement this Period -240240.00
	City Towson State MD Zip Code 21286	
	Purpose of Disbursement See Schedule E	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) NMB Research	Transaction ID: 21.016 Date of Disbursement 10 / 25 / 2010
	Mailing Address 206 N Fayette St.	Amount of Each Disbursement this Period 39500.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Research Services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	39500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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><b>A.</b> Full Name (Last, First, Middle Initial) Office of Tax and Revenue</p> <p>Mailing Address PO Box 96385</p> <p>City Washington State DC Zip Code 20090</p> <p>Purpose of Disbursement Payroll Taxes</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><b>Transaction ID:</b> 21.042 <b>Date of Disbursement</b> 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 298.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Office of Tax and Revenue</p> <p>Mailing Address PO Box 96385</p> <p>City Washington State DC Zip Code 20090</p> <p>Purpose of Disbursement Payroll Taxes</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><b>Transaction ID:</b> 21.043 <b>Date of Disbursement</b> 10 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 704.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Olsen &amp; Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd. #203</p> <p>City Austin State TX Zip Code 78701</p> <p>Purpose of Disbursement Mail 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><b>Transaction ID:</b> 21.116 <b>Date of Disbursement</b> 10 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 14743.33</p>

**SUBTOTAL** of Disbursements This Page (optional) ..... ► **15745.33**

**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 204 / 292

<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)  
Olsen & Shuvalov

Transaction ID: 21.117  
Date of Disbursement

Mailing Address 1609 Shoal Creek Blvd.  
#203

10 / 16 / 2010

City Austin State TX Zip Code 78701

Amount of Each Disbursement this Period

-14743.33

Purpose of Disbursement  
See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

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

Transaction ID: 21.118  
Date of Disbursement

Mailing Address 1609 Shoal Creek Blvd.  
#203

10 / 15 / 2010

City Austin State TX Zip Code 78701

Amount of Each Disbursement this Period

237898.28

Purpose of Disbursement  
Mail Postage, Printing/Production

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

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

Transaction ID: 21.119  
Date of Disbursement

Mailing Address 1609 Shoal Creek Blvd.  
#203

10 / 16 / 2010

City Austin State TX Zip Code 78701

Amount of Each Disbursement this Period

-237898.28

Purpose of Disbursement  
See Schedule E

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ..... ▶

-14743.33

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 205 / 292

<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) Olsen & Shuvalov	Transaction ID: 21.130 Date of Disbursement MM / DD / YYYY 10 / 16 / 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 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 disbursement reported on pre-general

B.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: 21.131 Date of Disbursement MM / DD / YYYY 10 / 16 / 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 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 disbursement reported on pre-general

C.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: 21.157 Date of Disbursement MM / DD / YYYY 10 / 20 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period 397943.64
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement Mail Postage, Printing/Production Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-245407.25</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Olsen &amp; Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd. #203</p> <p>City Austin State TX Zip Code 78701</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><b>Transaction ID:</b> 21.158</p> <p>Date of Disbursement 10 / 23 / 2010</p> <p>Amount of Each Disbursement this Period -397943.64</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Olsen &amp; Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd. #203</p> <p>City Austin State TX Zip Code 78701</p> <p>Purpose of Disbursement Mail 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><b>Transaction ID:</b> 21.159</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period 48285.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Olsen &amp; Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd. #203</p> <p>City Austin State TX Zip Code 78701</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><b>Transaction ID:</b> 21.160</p> <p>Date of Disbursement 10 / 23 / 2010</p> <p>Amount of Each Disbursement this Period -48285.00</p>

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

-397943.64

**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

A.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: 21.161 Date of Disbursement 10 / 20 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period 35941.72
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement Mail Postage, Printing/Production	
	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) Olsen & Shuvalov	Transaction ID: 21.162 Date of Disbursement 10 / 21 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period -35941.72
	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) ▼

C.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: 21.192 Date of Disbursement 10 / 28 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period 19659.53
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement Postage, Printing/Production	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	19659.53
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 208 / 292

<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) Papa Johns	Transaction ID: 21.026 Date of Disbursement 10 / 28 / 2010
	Mailing Address 8655 E Araphoe Road	Amount of Each Disbursement this Period 330.00
	City Englewood State CO Zip Code 80112	
	Purpose of Disbursement Food & bev. for volunteers	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Public Opinion Strategies	Transaction ID: 21.017 Date of Disbursement 10 / 25 / 2010
	Mailing Address 214 North Fayette St.	Amount of Each Disbursement this Period 143250.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Survey & Polling	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District: 00	

C.	Full Name (Last, First, Middle Initial) Public Opinion Strategies	Transaction ID: 21.074 Date of Disbursement 11 / 14 / 2010
	Mailing Address 214 North Fayette St.	Amount of Each Disbursement this Period 19000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Survey & Polling	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	162580.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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) Response America  Mailing Address 211 North Union St. Ste. 200  City Alexandria State VA Zip Code 22314  Purpose of Disbursement Direct Mail, postage and production Candidate Name  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) ▼	Transaction ID: 21.022 Date of Disbursement 10 / 27 / 2010	Amount of Each Disbursement this Period 119961.62  non-candidate
B.	Full Name (Last, First, Middle Initial) Rising Tide Media Group, LLC  Mailing Address 226 S Fayette  City Alexandria State VA Zip Code 22314  Purpose of Disbursement TV/Media Production, ad never aired 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) ▼	Transaction ID: 21.168 Date of Disbursement 10 / 21 / 2010	Amount of Each Disbursement this Period 14592.00
C.	Full Name (Last, First, Middle Initial) Rising Tide Media Group, LLC  Mailing Address 226 S Fayette  City Alexandria State VA Zip Code 22314  Purpose of Disbursement TV/Media Production 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) ▼	Transaction ID: 21.186 Date of Disbursement 10 / 26 / 2010	Amount of Each Disbursement this Period 15306.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	149859.62
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 210 / 292

<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)  
Rising Tide Media Group, LLC

Transaction ID: 21.187  
Date of Disbursement

Mailing Address 226 S Fayette

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

City State Zip Code  
Alexandria VA 22314

Amount of Each Disbursement this Period

-15306.00
-----------

Purpose of Disbursement  
See Schedule E

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
Rock Creek Advisors LLC

Transaction ID: 21.063  
Date of Disbursement

Mailing Address PO Box 4963

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

City State Zip Code  
Washington DC 20008

Amount of Each Disbursement this Period

7500.00
---------

Purpose of Disbursement  
Consulting, Donor Development

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District: 00

C.

Full Name (Last, First, Middle Initial)  
RSD

Transaction ID: 21.075  
Date of Disbursement

Mailing Address PO Box 200670

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

City State Zip Code  
Austin TX 78720

Amount of Each Disbursement this Period

205.68
--------

Purpose of Disbursement  
Mail, production, non-candidate

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

-7600.32
----------

**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 211 / 292

<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><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Scooters Pub</p> <p>Mailing Address 6200 S Rainbow</p> <p>City Las Vegas State NV Zip Code 89118</p> <p>Purpose of Disbursement Food &amp; bev., volunteers</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><b>Transaction ID:</b> 21.052</p> <p>Date of Disbursement 11 / 01 / 2010</p> <p>Amount of Each Disbursement this Period 304.40</p>
<p><b>B.</b></p> <p>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 &amp; 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><b>Transaction ID:</b> 21.018</p> <p>Date of Disbursement 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 23632.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Up Grade Films</p> <p>Mailing Address 3299 K Street, NW Ste. 200</p> <p>City Washington State DC Zip Code 20007</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><b>Transaction ID:</b> 21.132</p> <p>Date of Disbursement 10 / 20 / 2010</p> <p>Amount of Each Disbursement this Period -15674.27</p> <p>Original disbursement reported on pre-general</p>

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

**8262.13**

**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

A.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 21.010 Date of Disbursement 10 / 15 / 2010
	Mailing Address PO Box 27264	
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period 1026.55
	Purpose of Disbursement Payroll Taxes 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) ▼

B.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 21.046 Date of Disbursement 10 / 29 / 2010
	Mailing Address PO Box 27264	
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period 1026.55
	Purpose of Disbursement Payroll Taxes 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) Virginia Department of Taxation	Transaction ID: 21.087 Date of Disbursement 11 / 15 / 2010
	Mailing Address PO Box 27264	
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period 1026.55
	Purpose of Disbursement Payroll Taxes 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3079.65
<b>TOTAL</b> This Period (last page this line number only) .....	

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
Visa

Mailing Address PO Box 4513

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement  
Credit Card Payment (see memo entries)

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB21CCP.1  
Date of Disbursement  
10 / 19 / 2010

Amount of Each Disbursement this Period  
1130.39

Category/Type

**B.** Full Name (Last, First, Middle Initial)  
Chicken Out

Mailing Address 4866 Massachusetts Avenue, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement  
Credit-Mtg. exp. food & bev.

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SC21CCD.5  
Date of Disbursement  
10 / 19 / 2010

Amount of Each Disbursement this Period  
-100.40

Category/Type

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
CMDI

Mailing Address 7704 Leesburg Pike

City Falls Church State VA Zip Code 22043

Purpose of Disbursement  
Database Management Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SC21CCD.3  
Date of Disbursement  
10 / 19 / 2010

Amount of Each Disbursement this Period  
500.00

Category/Type

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional) ..... ► 1130.39

**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

<b>A.</b> Full Name (Last, First, Middle Initial) Custon Scoop Mailing Address 130 Pembroke Road Ste. 150 City Concord State NH Zip Code 03301 Purpose of Disbursement Press Clippings 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) ▼	Transaction ID: SC21CCD.2 Date of Disbursement 10 / 19 / 2010
	Amount of Each Disbursement this Period 499.00 [MEMO ITEM]

<b>B.</b> Full Name (Last, First, Middle Initial) Visa Mailing Address PO Box 4513 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Credit Card Payment (see memo entries) 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) ▼	Transaction ID: SB21CCP.5 Date of Disbursement 10 / 25 / 2010
	Amount of Each Disbursement this Period 15676.71

<b>C.</b> Full Name (Last, First, Middle Initial) Beekeeper Group Mailing Address 919 6th Street, NW City Washington State DC Zip Code 20001 Purpose of Disbursement T-shirts, non-candidate 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) ▼	Transaction ID: SC21CCD.13 Date of Disbursement 10 / 25 / 2010
	Amount of Each Disbursement this Period 1852.23 [MEMO ITEM]

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15676.71
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 215 / 292

<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.11 Date of Disbursement 10 / 25 / 2010
	Mailing Address 942 South Shady Grove Road	Amount of Each Disbursement this Period 612.70
	City Memphis State IL Zip Code 38120	
	Purpose of Disbursement Delivery	
	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) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Frontier Airlines	Transaction ID: SC21CCD.16 Date of Disbursement 10 / 25 / 2010
	Mailing Address 7001 Tower Road	Amount of Each Disbursement this Period 1006.20
	City Denver State CO Zip Code 80249	
	Purpose of Disbursement Travel, airfare	
	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) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) McNair Travel	Transaction ID: SC21CCD.17 Date of Disbursement 10 / 25 / 2010
	Mailing Address 1215 17th Street, NW	Amount of Each Disbursement this Period 945.00
	City Washington State DC Zip Code 20036	
	Purpose of Disbursement Travel Agent	
	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) ▼

[MEMO ITEM]

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 216 / 292

<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><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address 2702 Love Field Drive</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Travel, airfare</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><b>Transaction ID:</b> SC21CCD.12 <b>Date of Disbursement</b> 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 4384.60</p> <p><b>[MEMO ITEM]</b></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address 77 West Wacker Drive</p> <p>City Chicago State IL Zip Code 60601</p> <p>Purpose of Disbursement Travel, airfare</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><b>Transaction ID:</b> SC21CCD.18 <b>Date of Disbursement</b> 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 5926.40</p> <p><b>[MEMO ITEM]</b></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 4000 E Sky Harbor Blvd.</p> <p>City Phoenix State AZ Zip Code 85034</p> <p>Purpose of Disbursement Travel, airfare</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><b>Transaction ID:</b> SC21CCD.15 <b>Date of Disbursement</b> 10 / 25 / 2010</p> <p>Amount of Each Disbursement this Period 585.10</p> <p><b>[MEMO ITEM]</b></p>

**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)

PAGE 217 / 292

<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) Voter Consumer Research	Transaction ID: 21.019 Date of Disbursement
	Mailing Address 501 C Street, NE	<input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period
	Purpose of Disbursement Survey & Polling	<input type="text" value="55750.00"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Wilson-Grand Communications	Transaction ID: 21.169 Date of Disbursement
	Mailing Address 429 N St. Asaph Street	<input type="text" value="10"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement TV/Media Production	<input type="text" value="16341.75"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Wilson-Grand Communications	Transaction ID: 21.170 Date of Disbursement
	Mailing Address 429 N St. Asaph Street	<input type="text" value="10"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement See Schedule E	<input type="text" value="-16341.75"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="55750.00"/>
<b>TOTAL</b> 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 218 / 292

<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)  
Xigent, Inc.

Mailing Address PO Box 320129

City Alexandria State VA Zip Code 22320

Purpose of Disbursement Website support and development

Candidate Name

Office Sought:  House  Senate  President

State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 21.023  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
Xigent, Inc.

Mailing Address PO Box 320129

City Alexandria State VA Zip Code 22320

Purpose of Disbursement Website development

Candidate Name

Office Sought:  House  Senate  President

State: District: 00

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 21.076  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

PAGE 219 / 292

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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)  
Daniel Girard

Transaction ID: 28.196

Date of Disbursement

Mailing Address 5121 Kapalu Lane

<sup>M</sup> <input type="text" value="1"/>	<sup>M</sup> <input type="text" value="1"/>	/	<sup>D</sup> <input type="text" value="1"/>	<sup>D</sup> <input type="text" value="5"/>	/	<sup>Y</sup> <input type="text" value="2"/>	<sup>Y</sup> <input type="text" value="0"/>	<sup>Y</sup> <input type="text" value="1"/>	<sup>Y</sup> <input type="text" value="0"/>
---------------------------------------------	---------------------------------------------	---	---------------------------------------------	---------------------------------------------	---	---------------------------------------------	---------------------------------------------	---------------------------------------------	---------------------------------------------

City State Zip Code  
Las Vegas NV 89113

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
Refund

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

1000.00

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

1000.00

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 TV/Media Placement	Category/ Type
	000

Name of Federal Candidate supported or Opposed by expenditure:  
Amerish Bera

Calendar Year-To-Date Per Election for Office Sought	682323.50
---------------------------------------------------------	-----------

Date

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

Amount

669757.50

Transaction ID: E.024

Office Sought:  House State: CA  
 Senate District: 03  
 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 TV/Media Placement	Category/ Type
	000

Name of Federal Candidate supported or Opposed by expenditure:  
Joseph Simon Donnelly

Calendar Year-To-Date Per Election for Office Sought	152719.00
---------------------------------------------------------	-----------

Date

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

Amount

138280.00

Transaction ID: E.023

Office Sought:  House State: IN  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	808037.50
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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
--------------------	-------------	-------------------

Purpose of Expenditure  
TV/Media Placement

Category/Type **000**

Name of Federal Candidate supported or Opposed by expenditure:  
Maurice Hinchey

Calendar Year-To-Date Per Election for Office Sought **533584.01**

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

Amount  
**250248.01**

Transaction ID: E.025

Office Sought:  House State: NY  
 Senate District: 22  
 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 Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure  
Radio/Media Placement

Category/Type **000**

Name of Federal Candidate supported or Opposed by expenditure:  
Zack Space

Calendar Year-To-Date Per Election for Office Sought **77102.00**

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

Amount  
**75450.00**

Transaction ID: E.021

Office Sought:  House State: OH  
 Senate District: 18  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	<b>325698.01</b>
(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 2 / 0 2 / 2 0 1 0

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

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

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

---

Mailing Address  
1407 W 31st Avenue  
Ste. 100

---

City Anchorage	State AK	Zip Code 99503
-------------------	-------------	-------------------

---

Purpose of Expenditure Radio/Media Production	Category/ Type 000
--------------------------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Zack Space

---

Calendar Year-To-Date Per Election for Office Sought	77102.00
---------------------------------------------------------	----------

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

---

Amount  
1652.00

---

Transaction ID: E.011

---

Office Sought:  House State: OH  
 Senate District: 18  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

---

Notice filed on 10/14

Full Name (Last, First, Middle, Initial) of Payee  
Marsh Copsey + Associates, Inc.

---

Mailing Address  
601 Thirteenth St., NW  
11th Floor N

---

City Washington	State DC	Zip Code 20005
--------------------	-------------	-------------------

---

Purpose of Expenditure TV/Media Production	Category/ Type 000
-----------------------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Maurice Hinchey

---

Calendar Year-To-Date Per Election for Office Sought	533584.01
---------------------------------------------------------	-----------

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

---

Amount  
14790.00

---

Transaction ID: E.013

---

Office Sought:  House State: NY  
 Senate District: 22  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

---

Notice filed on 10/14

(a) SUBTOTAL of Itemized Independent Expenditures .....	16442.00
(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 2 / 0 2 / 2 0 1 0

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

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

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

Mailing Address  
600 Fairmont Avenue  
Ste. 306

City State Zip Code  
Towson MD 21286

Purpose of Expenditure Category/Type  
TV/Media Placement 000

Name of Federal Candidate supported or Opposed by expenditure:  
Ron Klein

Calendar Year-To-Date Per Election for Office Sought 215616.00

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

Amount  
202400.00

Transaction ID: E.027

Office Sought:  House State: FL  
 Senate District: 22  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Rising Tide Media Group, LLC

Mailing Address  
226 S Fayette

City State Zip Code  
Alexandria VA 22314

Purpose of Expenditure Category/Type  
TV/Media Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
Ron Klein

Calendar Year-To-Date Per Election for Office Sought 215616.00

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

Amount  
13216.00

Transaction ID: E.018

Office Sought:  House State: FL  
 Senate District: 22  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	215616.00
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

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

Mailing Address  
66 Canal Center Plaza  
Ste. 555

Amount  
394990.00

City State Zip Code  
Alexandria VA 22314

Transaction ID: E.022  
Office Sought:  House State: NY  
 Senate District: 25  
 Presidential

Purpose of Expenditure Category/Type  
TV/Media Placement 000

Name of Federal Candidate supported or Opposed by expenditure:  
Daniel B. Maffei

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
411340.00

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Marsh Copsey + Associates, Inc.

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

Mailing Address  
601 Thirteenth St., NW  
11th Floor N

Amount  
14370.00

City State Zip Code  
Washington DC 20005

Transaction ID: E.012  
Office Sought:  House State: NY  
 Senate District: 20  
 Presidential

Purpose of Expenditure Category/Type  
TV/Media Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
Scott M. Murphy

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
447366.00

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	409360.00
(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 2 / 0 2 / 2 0 1 0

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

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

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

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

Mailing Address  
600 Fairmont Avenue  
Ste. 306

Amount  
177450.00

City State Zip Code  
Towson MD 21286

**Transaction ID:** E.028  
Office Sought:  House State: NY  
 Senate District: 20  
 Presidential

Purpose of Expenditure  
TV/Media Placement  
Category/Type 000

Name of Federal Candidate supported or Opposed by expenditure:  
Scott M. Murphy

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 447366.00

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

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

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
39790.64

City State Zip Code  
Salt Lake City UT 84104

**Transaction ID:** E.003  
Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

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

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1080835.48

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>217240.64</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
<b>(c) TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Rising Tide Media Group, LLC

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

Mailing Address  
226 S Fayette

Amount  
14439.00

City State Zip Code  
Alexandria VA 22314

Transaction ID: E.017

Purpose of Expenditure Category/Type  
TV/Media Production 000

Office Sought:  House State: IN  
 Senate District: 02  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Joseph Simon Donnelly

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
152719.00

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/14

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

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

Mailing Address  
66 Canal Center Plaza  
Ste. 555

Amount  
92750.00

City State Zip Code  
Alexandria VA 22314

Transaction ID: E.026

Purpose of Expenditure Category/Type  
TV/Media Placement 000

Office Sought:  House State: HI  
 Senate District: 01  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Colleen W. Hanabusa

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
179726.50

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	107189.00
(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 2 / 0 2 / 2 0 1 0

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

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

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

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

Mailing Address  
429 N St. Asaph St.

Amount  
12566.00

City State Zip Code  
Alexandria VA 22314

Transaction ID: E.019

Purpose of Expenditure  
TV/Media Production

Category/  
Type 000

Office Sought:  House State: CA  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Amerish Bera

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 682323.50

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/14

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

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

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
128881.62

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.007

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/  
Type 000

Office Sought:  House State: CO  
 Senate District: 00  
 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 5968855.91

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/14

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>141447.62</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input style="width:100%;" type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input style="width:100%;" type="text"/>

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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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

---

Mailing Address  
 PO Box 2192

---

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

---

Purpose of Expenditure Phone Calls	Category/ Type
	000

---

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

---

Calendar Year-To-Date Per Election for Office Sought	5968855.91
---------------------------------------------------------	------------

Date  

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

Amount  
 877.55

**Transaction ID:** E.008

Office Sought:  House State: CO  
 Senate District: 00  
 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
----------------	-------------	-------------------

---

Purpose of Expenditure Mail Postage, Printing/Production	Category/ Type
	000

---

Name of Federal Candidate supported or Opposed by expenditure:  
 Sharron E. Angle

---

Calendar Year-To-Date Per Election for Office Sought	1599682.11
---------------------------------------------------------	------------

Date  

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

Amount  
 14743.33

**Transaction ID:** E.015

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
 2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	15620.88
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

Calendar Year-To-Date Per Election for Office Sought  
1599682.11

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

Amount  
72380.00

Transaction ID: E.030

Office Sought:  House State: NV  
 Senate District: 00  
 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

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

Calendar Year-To-Date Per Election for Office Sought  
2093183.52

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

Amount  
237898.28

Transaction ID: E.016

Office Sought:  House State: FL  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	310278.28
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

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

---

Calendar Year-To-Date Per Election for Office Sought  
2093183.52

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

Amount  
570970.89

Transaction ID: E.031

Office Sought:  House State: FL  
 Senate District: 00  
 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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

---

Calendar Year-To-Date Per Election for Office Sought  
1080835.48

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

Amount  
137859.68

Transaction ID: E.004

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	708830.57
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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
------------------------	-------------	-------------------

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type **000**

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

Calendar Year-To-Date Per Election for Office Sought **1080835.48**

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

Amount  
**53134.10**

Transaction ID: E.006

Office Sought:  House State: WA  
 Senate District: 00  
 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  
Mail Postage, Printing/Production

Category/Type **000**

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

Calendar Year-To-Date Per Election for Office Sought **5968855.91**

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

Amount  
**140874.62**

Transaction ID: E.005

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	<b>194008.72</b>
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Kelly A. Ayotte

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 19 / 2010

Amount

Transaction ID: E.062

Office Sought:  House State: NH  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice on 10/19

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  
TV/Media Placement

Category/Type

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

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 19 / 2010

Amount

Transaction ID: E.010

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input style="width: 100%; text-align: center;" type="text" value="806306.53"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input style="width: 100%; text-align: center;" type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input style="width: 100%; text-align: center;" type="text"/>

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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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
------------------------	-------------	-------------------

Purpose of Expenditure Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Calendar Year-To-Date Per Election for Office Sought	5968855.91
------------------------------------------------------	------------

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

Amount  
20033.94

Transaction ID: E.001

Office Sought:  House State: CO  
 Senate District: 00  
 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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Calendar Year-To-Date Per Election for Office Sought	5968855.91
------------------------------------------------------	------------

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

Amount  
227694.22

Transaction ID: E.002

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	247728.16
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 000

Name of Federal Candidate supported or Opposed by expenditure:  
Robin Carnahan

Calendar Year-To-Date Per Election for Office Sought  
2703952.03

Date  
MM / DD / YYYY  
10 / 19 / 2010

Amount  
789076.70

Transaction ID: E.009

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

Mailing Address  
600 Fairmont Avenue  
Ste. 306

City State Zip Code  
Towson MD 21286

Purpose of Expenditure Category/Type  
Radio/Media Placement 000

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Calendar Year-To-Date Per Election for Office Sought  
1456765.20

Date  
MM / DD / YYYY  
10 / 19 / 2010

Amount  
50371.20

Transaction ID: E.014

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	839447.90
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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  
MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

Mailing Address  
135 Professional Drive  
Ste. 104

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Expenditure Category/Type  
Mail Postage, Printing/Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Calendar Year-To-Date Per Election for Office Sought 1456765.20

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

Amount  
85826.50

Transaction ID: E.051

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/18

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

Mailing Address  
135 Professional Drive  
Ste. 104

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Expenditure Category/Type  
Mail Postage, Printing/Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Calendar Year-To-Date Per Election for Office Sought 1456765.20

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

Amount  
73047.87

Transaction ID: E.047

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/15

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	158874.37
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 / 2 0 / 2 0 1 0

Mailing Address  
135 Professional Drive  
Ste. 104

Amount  
52426.46

City State Zip Code  
Ponte Vedra Beach FL 32082

Transaction ID: E.048

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
1456765.20

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/19

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

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

Mailing Address  
1850 M Street, NW  
Ste. 235

Amount  
14787.00

City State Zip Code  
Washington DC 20036

Transaction ID: E.052

Purpose of Expenditure  
TV/Media Production  
Category/Type 000

Office Sought:  House State: CO  
 Senate District: 00  
 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  
5968855.91

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/19

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>67213.46</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	.....
<b>(c) TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Charlie Crist

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount

Transaction ID: E.061

Office Sought:  House State: FL  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

Mailing Address  
1407 W 31st Avenue  
Ste. 100

City State Zip Code  
Anchorage AK 99503

Purpose of Expenditure  
TV/Media Production

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Colleen W. Hanabusa

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount

Transaction ID: E.045

Office Sought:  House State: HI  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/15

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text" value="83499.04"/>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(c) TOTAL Independent Expenditures .....	<input type="text"/>

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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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
--------------------	-------------	-------------------

---

Purpose of Expenditure TV/Media Placement	Category/ Type 000
----------------------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Chet Edwards

---

Calendar Year-To-Date Per Election for Office Sought	164086.33
---------------------------------------------------------	-----------

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

Amount  
148412.06

Transaction ID: E.020

Office Sought:  House State: TX  
 Senate District: 17  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Up Grade Films

---

Mailing Address  
3299 K Street, NW  
Ste. 200

---

City Washington	State DC	Zip Code 20007
--------------------	-------------	-------------------

---

Purpose of Expenditure TV/Media Production	Category/ Type 000
-----------------------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Chet Edwards

---

Calendar Year-To-Date Per Election for Office Sought	164086.33
---------------------------------------------------------	-----------

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

Amount  
15674.27

Transaction ID: E.029

Office Sought:  House State: TX  
 Senate District: 17  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	164086.33
(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 2 / 0 2 / 2 0 1 0

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

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

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

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

Mailing Address  
429 N St. Asaph St.

Amount  
3905.51

City State Zip Code  
Alexandria VA 22314

**Transaction ID:** E.063

Purpose of Expenditure  
Radio/Media Production  
Category/Type 000

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
1456765.20

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/19

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

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

Mailing Address  
PO Box 2192

Amount  
16566.75

City State Zip Code  
Arlington VA 22202

**Transaction ID:** E.042

Purpose of Expenditure  
Phone Calls  
Category/Type 000

Office Sought:  House State: CO  
 Senate District: 00  
 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  
5968855.91

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/19

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>20472.26</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
<b>(c) TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type  
000

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

Calendar Year-To-Date Per Election for Office Sought  
1599682.11

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount  
37301.16

Transaction ID: E.059

Office Sought:  House State: NV  
 Senate District: 00  
 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 State Zip Code  
Arlington VA 22202

Purpose of Expenditure  
Phone Calls

Category/Type  
000

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

Calendar Year-To-Date Per Election for Office Sought  
1080835.48

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount  
20669.75

Transaction ID: E.041

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/19

(a) SUBTOTAL of Itemized Independent Expenditures .....	57970.91
(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  
MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 / 2 0 / 2 0 1 0

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
80173.86

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.999  
Office Sought:  House State: WV  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Manchin

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
264775.09

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/18

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

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

Mailing Address  
135 Professional Drive  
Ste. 104

Amount  
26668.16

City State Zip Code  
Ponte Vedra Beach FL 32082

Transaction ID: E.049  
Office Sought:  House State: AR  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

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  
203269.34

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/18

(a) SUBTOTAL of Itemized Independent Expenditures .....	106842.02
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 / 2 0 / 2 0 1 0

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
30147.62

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.037

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type  
000

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
1080835.48

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/18

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

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

Mailing Address  
PO Box 1330

Amount  
16350.00

City State Zip Code  
Stowe VT 05672

Transaction ID: E.040

Purpose of Expenditure  
TV/Media Production

Category/Type  
000

Office Sought:  House State: NY  
 Senate District: 25  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Daniel B. Maffei

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
411340.00

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/15

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>46497.62</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure Category/Type  
Mail Postage, Printing/Production 000

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

Calendar Year-To-Date Per Election for Office Sought 2093183.52

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount  
234028.06

Transaction ID: E.054

Office Sought:  House State: FL  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/19

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

Mailing Address  
1609 Shoal Creek Blvd.  
#203

City State Zip Code  
Austin TX 78701

Purpose of Expenditure Category/Type  
Mail Postage, Printing/Production 000

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

Calendar Year-To-Date Per Election for Office Sought 1599682.11

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount  
41999.66

Transaction ID: E.060

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	276027.72
(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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type

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

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 20 / 2010

Amount

Transaction ID: E.055

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/19

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  
Online Advertising

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Sestak

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 21 / 2010

Amount

Transaction ID: E.068

Office Sought:  House State: PA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/17

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text" value="30297.19"/>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(c) TOTAL Independent Expenditures .....	<input type="text"/>

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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 000

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

Calendar Year-To-Date Per Election for Office Sought 1599682.11

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

Amount  
1000.00

Transaction ID: E.067

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/17

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

Mailing Address  
2800 Shirlington Road  
Ste. 101

City State Zip Code  
Arlington VA 22206

Purpose of Expenditure Category/Type  
Online Advertising 000

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

Calendar Year-To-Date Per Election for Office Sought 6000.00

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

Amount  
1000.00

Transaction ID: E.066

Office Sought:  House State: CA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/17

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	2000.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

Mailing Address  
PO Box 2192

City State Zip Code  
Arlington VA 22202

Purpose of Expenditure  
Phone Calls

Category/Type **000**

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

Calendar Year-To-Date Per Election for Office Sought **1599682.11**

Date  
M M / D D / Y Y Y Y  
**10 / 21 / 2010**

Amount  
**7035.50**

Transaction ID: E.065

Office Sought:  House State: NV  
 Senate District: 00  
 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 State Zip Code  
Salt Lake City UT 84104

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type **000**

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Manchin

Calendar Year-To-Date Per Election for Office Sought **264775.09**

Date  
M M / D D / Y Y Y Y  
**10 / 21 / 2010**

Amount  
**88532.86**

Transaction ID: E.036

Office Sought:  House State: WV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>95568.36</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 **12 / 02 / 2010**

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
Kelly A. Ayotte

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 21 / 2010

Amount

Transaction ID: E.058

Office Sought:  House State: NH  
 Senate District: 00  
 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 State Zip Code  
Arlington VA 22202

Purpose of Expenditure  
Phone Calls

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Calendar Year-To-Date Per Election for Office Sought

Date  
MM / DD / YYYY  
10 / 21 / 2010

Amount

Transaction ID: E.064

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	<input type="text" value="42910.67"/>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<input type="text"/>
(c) TOTAL Independent Expenditures .....	<input type="text"/>

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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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

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

Mailing Address  
2800 Shirlington Road  
Ste. 901

Amount  
1000.00

City State Zip Code  
Arlington VA 22206

Transaction ID: E.069

Purpose of Expenditure  
Online Advertising  
Category/Type 000

Office Sought:  House State: WI  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Russ Feingold

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
1000.00

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/17

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

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

Mailing Address  
429 N St. Asaph St.

Amount  
16341.75

City State Zip Code  
Alexandria VA 22314

Transaction ID: E.071

Purpose of Expenditure  
TV/Media Production  
Category/Type 000

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
1456765.20

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures .....	17341.75
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....	
<b>(c) TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Direct Dial

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

Mailing Address  
107 South West Street  
PMB 499

Amount  
132459.60

City State Zip Code  
Alexandria VA 22314

Transaction ID: E.044

Purpose of Expenditure Category/Type  
Texting 000

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Robin Carnahan

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2703952.03

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 / 2 2 / 2 0 1 0

Mailing Address  
1850 M Street, NW  
Ste. 235

Amount  
14916.00

City State Zip Code  
Washington DC 20036

Transaction ID: E.070

Purpose of Expenditure Category/Type  
TV/Media Production 000

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Robin Carnahan

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
2703952.03

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	147375.60
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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

---

Mailing Address  
135 Professional Drive  
Ste. 104

---

City Ponte Vedra Beach	State FL	Zip Code 32082
---------------------------	-------------	-------------------

---

Purpose of Expenditure Mail Postage, Printing/Production	Category/ Type <span style="border: 1px solid black; padding: 2px;">000</span>
-------------------------------------------------------------	-----------------------------------------------------------------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">1456765.20</span>
---------------------------------------------------------	------------------------------------------------------------------------

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

---

Amount  
85834.41

---

**Transaction ID:** E.050

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

---

Mailing Address  
600 Fairmont Avenue  
Ste. 306

---

City Towson	State MD	Zip Code 21286
----------------	-------------	-------------------

---

Purpose of Expenditure TV/Media Placement	Category/ Type <span style="border: 1px solid black; padding: 2px;">000</span>
----------------------------------------------	-----------------------------------------------------------------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">1456765.20</span>
---------------------------------------------------------	------------------------------------------------------------------------

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

---

Amount  
249799.08

---

**Transaction ID:** E.053

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">335633.49</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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
------------------------	-------------	-------------------

---

Purpose of Expenditure Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Roy Blunt

---

Calendar Year-To-Date Per Election for Office Sought  
2703952.03

Date  
10 / 22 / 2010

---

Amount  
9255.56

Transaction ID: E.032

Office Sought:  House State: MO  
 Senate District: 00  
 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 Sequoia Vista Circle

---

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

---

Purpose of Expenditure Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Roy Blunt

---

Calendar Year-To-Date Per Election for Office Sought  
2703952.03

Date  
10 / 22 / 2010

---

Amount  
75583.80

Transaction ID: E.033

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	84839.36
(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 12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 Sequoia Vista Circle

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

Purpose of Expenditure Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

Name of Federal Candidate supported or Opposed by expenditure:  
Roy Blunt

Calendar Year-To-Date Per Election for Office Sought 2703952.03

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

Amount  
249934.92

Transaction ID: E.034

Office Sought:  House State: MO  
 Senate District: 00  
 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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Manchin

Calendar Year-To-Date Per Election for Office Sought 264775.09

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

Amount  
38376.96

Transaction ID: E.035

Office Sought:  House State: WV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	288311.88
(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 2 / 0 2 / 2 0 1 0

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Direct Dial

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

Mailing Address  
107 S West Street  
PMB 499

Amount  
74602.90

City State Zip Code  
Alexandria VA 22314

Transaction ID: E.043  
Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Texting  
Category/Type 000

Check One:  Support  Oppose

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

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Calendar Year-To-Date Per Election  
for Office Sought 1599682.11

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

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

Mailing Address  
1609 Shoal Creek Blvd.  
#203

Amount  
48285.00

City State Zip Code  
Austin TX 78701

Transaction ID: E.057  
Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Calendar Year-To-Date Per Election  
for Office Sought 1599682.11

(a) SUBTOTAL of Itemized Independent Expenditures .....	122887.90
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Charlie Crist

---

Calendar Year-To-Date Per Election for Office Sought	2093183.52
------------------------------------------------------	------------

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

---

Amount  
397943.64

---

Transaction ID: E.056

---

Office Sought:  House State: FL  
 Senate District: 00  
 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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Dennis Heck

---

Calendar Year-To-Date Per Election for Office Sought	36200.28
------------------------------------------------------	----------

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

---

Amount  
36200.28

---

Transaction ID: E.084

---

Office Sought:  House State: WA  
 Senate District: 03  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/22

(a) SUBTOTAL of Itemized Independent Expenditures .....	434143.92
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

---

Mailing Address  
135 Professional Drive  
Ste. 104

---

City Ponte Vedra Beach	State FL	Zip Code 32082
---------------------------	-------------	-------------------

---

Purpose of Expenditure Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

---

Calendar Year-To-Date Per Election for Office Sought	1456765.20
------------------------------------------------------	------------

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

---

Amount  
73298.47

Transaction ID: E.093

---

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/21

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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

---

Calendar Year-To-Date Per Election for Office Sought	5968855.91
------------------------------------------------------	------------

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

---

Amount  
129529.88

Transaction ID: E.038

---

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	202828.35
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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  
Mail Postage, Printing/Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Calendar Year-To-Date Per Election for Office Sought 5968855.91

Date  
MM / DD / YYYY  
10 / 25 / 2010

Amount  
67963.76

Transaction ID: E.039

Office Sought:  House State: CO  
 Senate District: 00  
 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 State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Calls 000

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Calendar Year-To-Date Per Election for Office Sought 5968855.91

Date  
MM / DD / YYYY  
10 / 25 / 2010

Amount  
14081.20

Transaction ID: E.087

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	82044.96
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 / 2 5 / 2 0 1 0

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
23406.88

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.080

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Office Sought:  House State: WV  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Nick Rahall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
31792.04

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

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

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
8385.16

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.081

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Office Sought:  House State: WV  
 Senate District: 03  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Nick Rahall

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
31792.04

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/22

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>31792.04</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

Mailing Address  
PO Box 2192

City State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Calls 000

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

Calendar Year-To-Date Per Election for Office Sought 1080835.48

Date  
MM / DD / YYYY  
10 / 25 / 2010

Amount  
1382.05

Transaction ID: E.086

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/22

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

Mailing Address  
PO Box 2192

City State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Calls 000

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

Calendar Year-To-Date Per Election for Office Sought 1080835.48

Date  
MM / DD / YYYY  
10 / 25 / 2010

Amount  
3578.30

Transaction ID: E.089

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	4960.35
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 / 2 5 / 2 0 1 0

Mailing Address  
PO Box 2192

Amount  
23353.75

City State Zip Code  
Arlington VA 22202

**Transaction ID:** E.090  
Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Phone Calls  
Category/Type 000

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Calendar Year-To-Date Per Election  
for Office Sought 1080835.48

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

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

Mailing Address  
PO Box 2192

Amount  
8775.83

City State Zip Code  
Arlington VA 22202

**Transaction ID:** E.091  
Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Phone Calls  
Category/Type 000

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Calendar Year-To-Date Per Election  
for Office Sought 1080835.48

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>32129.58</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	_____
(c) <b>TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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  
Mail Postage, Printing/Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Manchin

Calendar Year-To-Date Per Election for Office Sought 264775.09

Date  
MM / DD / YYYY  
10 / 25 / 2010

Amount  
38376.96

Transaction ID: E.076

Office Sought:  House State: WV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

Mailing Address  
135 Professional Drive Ste. 104

City State Zip Code  
Ponte Vedra Beach FL 32082

Purpose of Expenditure Category/Type  
Mail Postage, Printing/Production 000

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

Calendar Year-To-Date Per Election for Office Sought 203269.34

Date  
MM / DD / YYYY  
10 / 25 / 2010

Amount  
63303.15

Transaction ID: E.046

Office Sought:  House State: AR  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	101680.11
(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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

---

Mailing Address  
135 Professional Drive  
Ste. 104

---

City	State	Zip Code
Ponte Vedra Beach	FL	32082

---

Purpose of Expenditure Mail Postage, Printing/Production	Category/ Type	000
-------------------------------------------------------------	-------------------	-----

---

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

---

Calendar Year-To-Date Per Election for Office Sought	203269.34
---------------------------------------------------------	-----------

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

---

Amount  
39756.58

---

Transaction ID: E.094

---

Office Sought:  House State: AR  
 Senate District: 00  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

---

Notice filed on 10/20

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 Mail Postage, Printing/Production	Category/ Type	000
-------------------------------------------------------------	-------------------	-----

---

Name of Federal Candidate supported or Opposed by expenditure:  
Richard R. Larsen

---

Calendar Year-To-Date Per Election for Office Sought	31865.48
---------------------------------------------------------	----------

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

---

Amount  
31865.48

---

Transaction ID: E.085

---

Office Sought:  House State: WA  
 Senate District: 02  
 Presidential

---

Check One:  Support  Oppose

---

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

---

Notice filed on 10/22

(a) SUBTOTAL of Itemized Independent Expenditures .....	71622.06
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 / 2 5 / 2 0 1 0

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
33439.02

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.082

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Office Sought:  House State: WV  
 Senate District: 01  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Michael A. Oliverio

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
66878.04

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/22

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

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

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
33439.02

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.083

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Office Sought:  House State: WV  
 Senate District: 01  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Michael A. Oliverio

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
66878.04

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	66878.04
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 / 2 5 / 2 0 1 0

Mailing Address  
PO Box 2192

Amount  
5711.45

City State Zip Code  
Arlington VA 22202

Transaction ID: E.088

Purpose of Expenditure  
Phone Calls

Category/Type 000

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Rand Paul

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1456765.20

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

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

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
133831.42

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.077

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type 000

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

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

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1080835.48

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/22

(a) SUBTOTAL of Itemized Independent Expenditures .....	139542.87
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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
------------------------	-------------	-------------------

---

Purpose of Expenditure Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

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

---

Calendar Year-To-Date Per Election for Office Sought	1080835.48
------------------------------------------------------	------------

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

---

Amount  
19554.76

Transaction ID: E.078

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/22

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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

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

---

Calendar Year-To-Date Per Election for Office Sought	1080835.48
------------------------------------------------------	------------

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

---

Amount  
15641.24

Transaction ID: E.079

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/22

(a) SUBTOTAL of Itemized Independent Expenditures .....	35196.00
(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 2 / 0 2 / 2 0 1 0

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

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

Full Name (Last, First, Middle, Initial) of Payee  
Up Grade Films

Mailing Address  
3299 K Street, NW  
Ste. 200

City State Zip Code  
Washington DC 20007

Purpose of Expenditure Category/Type  
TV/Media Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
Maurice Hinchey

Calendar Year-To-Date Per Election for Office Sought  
533584.01

Date  
MM / DD / YYYY  
10 / 26 / 2010

Amount  
12896.00

Transaction ID: E.099

Office Sought:  House State: NY  
 Senate District: 22  
 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 000

Name of Federal Candidate supported or Opposed by expenditure:  
Maurice Hinchey

Calendar Year-To-Date Per Election for Office Sought  
533584.01

Date  
MM / DD / YYYY  
10 / 26 / 2010

Amount  
255650.00

Transaction ID: E.098

Office Sought:  House State: NY  
 Senate District: 22  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	268546.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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
Purpose of Expenditure TV/Media Placement		Category/ Type <span style="border: 1px solid black; padding: 2px;">000</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Heath Shuler

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">252378.00</span>
---------------------------------------------------------	-----------------------------------------------------------------------

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

Amount  
240725.00

**Transaction ID:** E.096

Office Sought:  House State: NC  
 Senate District: 11  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Up Grade Films

---

Mailing Address  
3299 K Street, NW  
Ste. 200

---

City Washington	State DC	Zip Code 20007
Purpose of Expenditure TV/Media Production		Category/ Type <span style="border: 1px solid black; padding: 2px;">000</span>

---

Name of Federal Candidate supported or Opposed by expenditure:  
Heath Shuler

---

Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">252378.00</span>
---------------------------------------------------------	-----------------------------------------------------------------------

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

Amount  
11653.00

**Transaction ID:** E.097

Office Sought:  House State: NC  
 Senate District: 11  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;">252378.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 000

Name of Federal Candidate supported or Opposed by expenditure:  
Sanford Bishop

Calendar Year-To-Date Per Election for Office Sought 137856.00

Date  
MM / DD / YYYY  
10 / 26 / 2010

Amount  
122750.00

Transaction ID: E.101

Office Sought:  House State: GA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Rising Tide Media Group, LLC

Mailing Address  
226 N Fayette

City State Zip Code  
Alexandria VA 22314

Purpose of Expenditure Category/Type  
TV/Media Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
Sanford Bishop

Calendar Year-To-Date Per Election for Office Sought 137856.00

Date  
MM / DD / YYYY  
10 / 26 / 2010

Amount  
15106.00

Transaction ID: E.102

Office Sought:  House State: GA  
 Senate District: 02  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	137856.00
(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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 000

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

Calendar Year-To-Date Per Election for Office Sought 5968855.91

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

Amount  
645988.95

Transaction ID: E.072

Office Sought:  House State: CO  
 Senate District: 00  
 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 000

Name of Federal Candidate supported or Opposed by expenditure:  
Colleen W. Hanabusa

Calendar Year-To-Date Per Election for Office Sought 179726.50

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

Amount  
76194.50

Transaction ID: E.100

Office Sought:  House State: HI  
 Senate District: 01  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	722183.45
(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 2 / 0 2 / 2 0 1 0

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

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

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

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

Mailing Address  
600 Fairmont Avenue  
Ste. 306

Amount  
48928.00

City State Zip Code  
Towson MD 21286

Transaction ID: E.095

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
1456765.20

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

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

Mailing Address  
80 E Rio Salado Pakrway  
Ste. 814

Amount  
350000.00

City State Zip Code  
Tempe AZ 85281

Transaction ID: E.092

Purpose of Expenditure  
GOTV, Voter Contact  
Category/Type 000

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
5968855.91

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	398928.00
(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 2 / 0 2 / 2 0 1 0

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

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

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

Mailing Address  
600 Fairmont Avenue  
Ste. 306

City State Zip Code  
Towson MD 21286

Purpose of Expenditure Category/Type  
TV/Media Placement 000

Name of Federal Candidate supported or Opposed by expenditure:  
Scott M. Murphy

Calendar Year-To-Date Per Election for Office Sought 447366.00

Date  
MM / DD / YYYY  
10 / 27 / 2010

Amount  
240240.00

Transaction ID: E.104

Office Sought:  House State: NY  
 Senate District: 20  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Full Name (Last, First, Middle, Initial) of Payee  
Rising Tide Media Group, LLC

Mailing Address  
226 S Fayette

City State Zip Code  
Alexandria VA 22314

Purpose of Expenditure Category/Type  
TV/Media Production 000

Name of Federal Candidate supported or Opposed by expenditure:  
Scott M. Murphy

Calendar Year-To-Date Per Election for Office Sought 447366.00

Date  
MM / DD / YYYY  
10 / 27 / 2010

Amount  
15306.00

Transaction ID: E.105

Office Sought:  House State: NY  
 Senate District: 20  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	255546.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 MM / DD / YYYY  
12 / 02 / 2010

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

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

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

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

Mailing Address  
80 E Rio Salado Parkway  
Ste. 814

Amount  
300000.00

City State Zip Code  
Tempe AZ 85281

Transaction ID: E.106  
Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Phone Calls/Printing-  
/Lit. Distribution  
Category/  
Type 000

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1080835.48

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

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

Mailing Address  
PO Box 2192

Amount  
19295.90

City State Zip Code  
Arlington VA 22202

Transaction ID: E.115  
Office Sought:  House State: FL  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Phone Calls  
Category/  
Type 000

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

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 2093183.52

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/26

(a) SUBTOTAL of Itemized Independent Expenditures .....	319295.90
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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
------------------------	-------------	-------------------

---

Purpose of Expenditure Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
John Salazar

---

Calendar Year-To-Date Per Election for Office Sought	45389.86
------------------------------------------------------	----------

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

---

Amount  
45389.86

---

Transaction ID: E.107

Office Sought:  House State: CO  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/25

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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Edwin G. Perlmutter

---

Calendar Year-To-Date Per Election for Office Sought	30166.46
------------------------------------------------------	----------

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

---

Amount  
26447.46

---

Transaction ID: E.108

Office Sought:  House State: CO  
 Senate District: 07  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/25

(a) SUBTOTAL of Itemized Independent Expenditures .....	71837.32
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 / 2 8 / 2 0 1 0

Mailing Address  
PO Box 2192

Amount  
6216.90

City State Zip Code  
Arlington VA 22202

Transaction ID: E.111  
Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Purpose of Expenditure  
Phone Calls

Category/Type  
000

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

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1599682.11

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/24

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

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

Mailing Address  
1780 W Sequoia Vista Circle

Amount  
28629.20

City State Zip Code  
Salt Lake City UT 84104

Transaction ID: E.109  
Office Sought:  House State: MO  
 Senate District: 03  
 Presidential

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type  
000

Name of Federal Candidate supported or Opposed by expenditure:  
Russ Carnahan

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 28629.20

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/25

(a) SUBTOTAL of Itemized Independent Expenditures .....	34846.10
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

Purpose of Expenditure: TV/Media Placement Category/Type: 000

Name of Federal Candidate supported or Opposed by expenditure:  
Robin Carnahan

Calendar Year-To-Date Per Election for Office Sought: 2703952.03

Date: 10 / 28 / 2010

Amount: 140125.00

Transaction ID: E.103

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

Mailing Address  
600 Fairmont Avenue  
Ste. 306

City: Towson State: MD Zip Code: 21286

Purpose of Expenditure: TV/Media Placement Category/Type: 000

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Calendar Year-To-Date Per Election for Office Sought: 1456765.20

Date: 10 / 28 / 2010

Amount: 208165.92

Transaction ID: E.073

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	348290.92
(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: 12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Heck

Calendar Year-To-Date Per Election for Office Sought 67672.08

Date  
MM / DD / YYYY  
10 / 28 / 2010

Amount  
18678.52  
Transaction ID: E.117

Office Sought:  House State: NV  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/24

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

Mailing Address  
1609 Shoal Creek Blvd.  
#203

City State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Postage, Printing/Production  
Category/Type 000

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Heck

Calendar Year-To-Date Per Election for Office Sought 67672.08

Date  
MM / DD / YYYY  
10 / 28 / 2010

Amount  
46495.56  
Transaction ID: E.119

Office Sought:  House State: NV  
 Senate District: 03  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/27

(a) SUBTOTAL of Itemized Independent Expenditures .....	65174.08
(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  
MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 State Zip Code  
Austin TX 78701

Purpose of Expenditure  
Mail Printing/Production  
Category/Type 000

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Heck

Calendar Year-To-Date Per Election  
for Office Sought 67672.08

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

Amount  
2498.00

Transaction ID: E.122

Office Sought:  House State: NV  
 Senate District: 03  
 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 State Zip Code  
Arlington VA 22202

Purpose of Expenditure  
Phone Calls  
Category/Type 000

Name of Federal Candidate supported or Opposed by expenditure:  
John (Jack) William Conway

Calendar Year-To-Date Per Election  
for Office Sought 1456765.20

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

Amount  
6140.85

Transaction ID: E.110

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/24

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>8638.85</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	<input style="width:100%;" type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input style="width:100%;" type="text"/>

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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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
------------------------	-------------	-------------------

Purpose of Expenditure  
Mail Printing/Production

Category/Type  
000

Name of Federal Candidate supported or Opposed by expenditure:  
Ryan Frazier

Calendar Year-To-Date Per Election for Office Sought  
30166.46

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

Amount  
3719.00

Transaction ID: E.075

Office Sought:  House State: CO  
 Senate District: 07  
 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
----------------	-------------	-------------------

Purpose of Expenditure  
Mail Postage, Printing/Production

Category/Type  
000

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

Calendar Year-To-Date Per Election for Office Sought  
1599682.11

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

Amount  
25188.03

Transaction ID: E.118

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/24

(a) SUBTOTAL of Itemized Independent Expenditures .....	28907.03
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 Mail Postage, Printing/Production	Category/Type 000
-------------------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

---

Calendar Year-To-Date Per Election for Office Sought  
1599682.11

Date  
10 / 28 / 2010

Amount  
74697.66

Transaction ID: E.120

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010

Notice filed on 10/27

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 Mail Printing/Production	Category/Type 000
----------------------------------------------------	----------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

---

Calendar Year-To-Date Per Election for Office Sought  
1599682.11

Date  
10 / 28 / 2010

Amount  
2498.00

Transaction ID: E.121

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_

2010

(a) SUBTOTAL of Itemized Independent Expenditures .....	77195.66
(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 12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

Mailing Address  
PO Box 2192

City State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Calls 000

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

Calendar Year-To-Date Per Election for Office Sought 1599682.11

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

Amount  
5999.81

Transaction ID: E.112

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/26

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

Mailing Address  
PO Box 2192

City State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Calls 000

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

Calendar Year-To-Date Per Election for Office Sought 1599682.11

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

Amount  
2878.10

Transaction ID: E.116

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/27

(a) SUBTOTAL of Itemized Independent Expenditures .....	8877.91
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

Mailing Address  
PO Box 2192

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

Purpose of Expenditure Phone Calls	Category/ Type 000
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Calendar Year-To-Date Per Election for Office Sought	5968855.91
---------------------------------------------------------	------------

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

Amount  
18117.85

Transaction ID: E.113

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/26

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

Mailing Address  
PO Box 2192

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

Purpose of Expenditure Phone Calls	Category/ Type 000
---------------------------------------	--------------------------

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Calendar Year-To-Date Per Election for Office Sought	5968855.91
---------------------------------------------------------	------------

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

Amount  
1955.05

Transaction ID: E.114

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/26

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	20072.90
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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  
GOTV/Voter Contact 000

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Calendar Year-To-Date Per Election for Office Sought  
5968855.91

Date  
MM / DD / YYYY  
10 / 28 / 2010

Amount  
3719.00

Transaction ID: E.074

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/29

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

Mailing Address  
80 E Rio Salado Parkway  
Ste. 814

City State Zip Code  
Tempe AZ 85281

Purpose of Expenditure Category/Type  
Phone Calls/Printing- /Lit. Distribution 000

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

Calendar Year-To-Date Per Election for Office Sought  
1599682.11

Date  
MM / DD / YYYY  
11 / 04 / 2010

Amount  
100000.00

Transaction ID: E.126

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 11/1

(a) SUBTOTAL of Itemized Independent Expenditures .....	103719.00
(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  
MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

Mailing Address  
PO Box 2192

City: Arlington State: VA Zip Code: 22202

Purpose of Expenditure: Phone Calls Category/Type: 000

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

Calendar Year-To-Date Per Election for Office Sought: 1080835.48

Date: 11 / 04 / 2010

Amount: 1119.35

Transaction ID: E.125

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify): \_\_\_\_\_  
2010

Notice filed on 10/29

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

Mailing Address  
PO Box 2192

City: Arlington State: VA Zip Code: 22202

Purpose of Expenditure: Phone Calls Category/Type: 000

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

Calendar Year-To-Date Per Election for Office Sought: 1080835.48

Date: 11 / 04 / 2010

Amount: 1749.45

Transaction ID: E.123

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify): \_\_\_\_\_  
2010

Notice filed on 10/29

(a) SUBTOTAL of Itemized Independent Expenditures .....	2868.80
(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: 12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 1 / 0 4 / 2 0 1 0

Mailing Address  
PO Box 2192

Amount  
14598.10

City State Zip Code  
Arlington VA 22202

Transaction ID: E.124

Purpose of Expenditure  
Phone Calls

Category/Type 000

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

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

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
1080835.48

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/29

Full Name (Last, First, Middle, Initial) of Payee  
StrategicDirection.com

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

Mailing Address  
420 East Jefferson Street  
Ste. 106

Amount  
6707.15

City State Zip Code  
Tallahassee FL 32301

Transaction ID: E.127

Purpose of Expenditure  
Phone Calls

Category/Type 000

Office Sought:  House State: WV  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Manchin

Check One:  Support  Oppose

Calendar Year-To-Date Per Election for Office Sought  
264775.09

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/29

(a) SUBTOTAL of Itemized Independent Expenditures .....	21305.25
(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 2 / 0 2 / 2 0 1 0

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

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

Full Name (Last, First, Middle, Initial) of Payee  
StrategicDirection.com

---

Mailing Address  
420 East Jefferson Street  
Ste. 106

---

City Tallahassee	State FL	Zip Code 32301
---------------------	-------------	-------------------

---

Purpose of Expenditure Phone Calls	Category/ Type 000
---------------------------------------	--------------------------

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

Amount  
3769.65

Transaction ID: E.128

Office Sought:  House State: WV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/30

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Manchin

---

Calendar Year-To-Date Per Election  
for Office Sought 264775.09

Full Name (Last, First, Middle, Initial) of Payee  
StrategicDirection.com

---

Mailing Address  
420 East Jefferson St.  
Ste. 106

---

City Tallahassee	State FL	Zip Code 32301
---------------------	-------------	-------------------

---

Purpose of Expenditure Phone Calls	Category/ Type 000
---------------------------------------	--------------------------

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

Amount  
2152.65

Transaction ID: E.130

Office Sought:  House State: WV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/31-amt. of  
IE was estimated at the time  
of filing

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Manchin

---

Calendar Year-To-Date Per Election  
for Office Sought 264775.09

(a) SUBTOTAL of Itemized Independent Expenditures .....	5922.30
(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 2 / 0 2 / 2 0 1 0

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

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

Full Name (Last, First, Middle, Initial) of Payee  
StrategicDirection.com

Mailing Address  
420 East Jefferson St.  
Ste.106

City State Zip Code  
Tallahassee FL 32301

Purpose of Expenditure Category/Type  
Phone Calls 000

Name of Federal Candidate supported or Opposed by expenditure:  
Joe Manchin

Calendar Year-To-Date Per Election for Office Sought 264775.09

Full Name (Last, First, Middle, Initial) of Payee  
StrategicDirection.com

Mailing Address  
420 East Jefferson Street  
Ste. 106

City State Zip Code  
Tallahassee FL 32301

Purpose of Expenditure Category/Type  
Phone Calls 000

Name of Federal Candidate supported or Opposed by expenditure:  
Alexander Giannoulas

Calendar Year-To-Date Per Election for Office Sought 1127230.47

Date  
MM / DD / YYYY  
11 / 14 / 2010

Amount  
6685.00

Transaction ID: E.131

Office Sought:  House State: WV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

The communication occurred on 11/1 - notice not required.

Date  
MM / DD / YYYY  
11 / 14 / 2010

Amount  
7980.60

Transaction ID: E.129

Office Sought:  House State: IL  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/30

(a) SUBTOTAL of Itemized Independent Expenditures .....	14665.60
(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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 1 / 1 5 / 2 0 1 0

Mailing Address  
PO Box 2192

Amount  
5066.95

City State Zip Code  
Arlington VA 22202

Transaction ID: E.135

Purpose of Expenditure  
Phone Calls

Category/  
Type 000

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Kenneth R. Buck

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 5968855.91

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/31

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

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

Mailing Address  
PO Box 2192

Amount  
4828.15

City State Zip Code  
Arlinton VA 22202

Transaction ID: E.132

Purpose of Expenditure  
Phone Calls

Category/  
Type 000

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Roy Blunt

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 2703952.03

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/30

(a) SUBTOTAL of Itemized Independent Expenditures .....	9895.10
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 1 / 1 5 / 2 0 1 0

Mailing Address  
PO Box 2192

Amount  
3053.80

City State Zip Code  
Arlington VA 22202

Transaction ID: E.133

Purpose of Expenditure  
Phone Calls

Category/  
Type 000

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Roy Blunt

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 2703952.03

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/30

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

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

Mailing Address  
PO Box 2192

Amount  
19935.40

City State Zip Code  
Alexandria VA 22202

Transaction ID: E.142

Purpose of Expenditure  
Phone Calls

Category/  
Type 000

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Roy Blunt

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 2703952.03

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

The communication occurred on  
11/1 - notice not required

(a) SUBTOTAL of Itemized Independent Expenditures .....	22989.20
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

---

Mailing Address  
PO Box 2192

---

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

---

Purpose of Expenditure Phone Calls	Category/ Type 000
---------------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Roy Blunt

---

Calendar Year-To-Date Per Election  
for Office Sought 2703952.03

Date  
MM / DD / YYYY  
11 / 15 / 2010

Amount  
20964.80

**Transaction ID:** E.144

Office Sought:  House State: MO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/30

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

---

Mailing Address  
PO Box 2192

---

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

---

Purpose of Expenditure Phone Calls	Category/ Type 000
---------------------------------------	--------------------------

---

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

---

Calendar Year-To-Date Per Election  
for Office Sought 1599682.11

Date  
MM / DD / YYYY  
11 / 15 / 2010

Amount  
3304.50

**Transaction ID:** E.137

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/31

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	24269.30
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

---

Mailing Address  
PO Box 2192

---

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

---

Purpose of Expenditure Phone Calls	Category/ Type 000
---------------------------------------	--------------------------

Date  
MM / DD / YYYY  
11 / 15 / 2010

Amount  
4448.35

Transaction ID: E.139

Office Sought:  House State: NV  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Name of Federal Candidate supported or Opposed by expenditure:  
Sharron E. Angle

---

Calendar Year-To-Date Per Election  
for Office Sought  
1599682.11

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

The communication occurred on  
11/1-notice not required

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

---

Mailing Address  
PO Box 2192

---

City Arlington	State VA	Zip Code 22202
-------------------	-------------	-------------------

---

Purpose of Expenditure Phone Calls	Category/ Type 000
---------------------------------------	--------------------------

Date  
MM / DD / YYYY  
11 / 15 / 2010

Amount  
14662.35

Transaction ID: E.138

Office Sought:  House State: CO  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

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

---

Calendar Year-To-Date Per Election  
for Office Sought  
5968855.91

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

The communication occurred on  
11/1-notice not required

(a) SUBTOTAL of Itemized Independent Expenditures .....	19110.70
(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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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

Mailing Address  
PO Box 2192

City State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Calls 000

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

Calendar Year-To-Date Per Election for Office Sought 1080835.48

Date  
MM / DD / YYYY  
11 / 15 / 2010

Amount  
15597.45

Transaction ID: E.136

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/31

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

Mailing Address  
PO Box 2192

City State Zip Code  
Arlington VA 22202

Purpose of Expenditure Category/Type  
Phone Calls 000

Name of Federal Candidate supported or Opposed by expenditure:  
Rand Paul

Calendar Year-To-Date Per Election for Office Sought 1456765.20

Date  
MM / DD / YYYY  
11 / 15 / 2010

Amount  
7202.55

Transaction ID: E.134

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Check One:  Support  Oppose

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

Notice filed on 10/31

(a) SUBTOTAL of Itemized Independent Expenditures .....	22800.00
(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 MM / DD / YYYY  
12 / 02 / 2010

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

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER <b>C</b> 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 1 / 1 5 / 2 0 1 0

Mailing Address  
PO Box 2192

Amount  
4024.95

City State Zip Code  
Arlington VA 22202

Transaction ID: E.140

Purpose of Expenditure  
Phone Calls

Category/  
Type 000

Office Sought:  House State: KY  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Rand Paul

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1456765.20

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

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

The communication occurred on  
11/1-notice not required  
Date  
M M / D D / Y Y Y Y  
1 1 / 1 5 / 2 0 1 0

Mailing Address  
PO Box 2192

Amount  
11208.65

City State Zip Code  
Arlington VA 22202

Transaction ID: E.143

Purpose of Expenditure  
Phone Calls

Category/  
Type 000

Office Sought:  House State: WA  
 Senate District: 00  
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:  
Dino Rossi

Check One:  Support  Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1080835.48

Disbursement For:  Primary  General  
 Other (specify) : \_\_\_\_\_  
2010

The communication occurred on  
11/1-notice not required

(a) SUBTOTAL of Itemized Independent Expenditures .....	15233.60
(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 2 / 0 2 / 2 0 1 0

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

NAME OF COMMITTEE (In Full) American Crossroads		FEC IDENTIFICATION NUMBER <b>C</b> 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 1 / 1 5 / 2 0 1 0
Mailing Address PO Box 2192		Amount 46388.92
City Arlington		<b>Transaction ID:</b> E.141
State VA		Office Sought: <input type="checkbox"/> House State: <u>FL</u>
Zip Code 22202		<input checked="" type="checkbox"/> Senate District: <u>00</u>
Purpose of Expenditure Phone Calls		<input type="checkbox"/> Presidential
Category/ Type <b>000</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate supported or Opposed by expenditure: Marco Rubio		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
Calendar Year-To-Date Per Election for Office Sought		<input type="checkbox"/> Other (specify) : _____ 2010
2093183.52		The communication occurred on 11/1-notice not required

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<b>46388.92</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures .....	<b>12042461.91</b>
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 2 / 0 2 / 2 0 1 0