

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name **Crossroads Grassroots Policy Strategies**

(b) Address (number and street) check if different than previously reported
1401 New York Avenue NW
Ste. 1200

(c) City, State and ZIP Code
Washington DC 20005

(d) Name of Employer or Principal Place of Business (e) Occupation

2. FEC Identification Number

C C30001655

3. Is This Statement

New
or
 Amended

4. Covering Period

MM / DD / YYYY
01 / 26 / 2012
through
MM / DD / YYYY
02 / 06 / 2012

5. (a) Date of Public Distribution(s)

MM / DD / YYYY
02 / 06 / 2012

(b) Communication Title

Every Level

6. The filer is a(n): (a) Individual (b) Unincorporated Organization (c) Qualified Nonprofit Corporation (11 CFR 114.10)

(d) Corporation, Labor Organization or Qualified Nonprofit Corporation making communications under 11 CFR 114.15

(e) Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account?

Yes No

8. Custodian of Records

(a) Name
Caleb Crosby

(b) Address (number and street)
1401 New York Avenue NW, Ste 1200

(c) City, State and ZIP Code
Washington DC 20005

(d) Name of Employer or Principal Place of Business (e) Occupation
Crossroads GPS CFO

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

2885.86

Under penalty of perjury, I certify that this statement is true, correct and complete.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Caleb Crosby

SIGNATURE Caleb Crosby

[Electronically Filed] DATE 02/07/2012

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this statement to the penalties of 2 U.S.C. §437g.

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

| | | |
|-----------|---|--------------------------------------|
| A. | (a) Name Steven Law | Transaction ID : S.1 |
| | (b) Address (number and street) 1401 New York Avenue NW, Ste 1200 | |
| | (c) City, State and ZIP Code Washington DC 20005 | |
| | (d) Name of Employer or Principal Place of Business Crossroads GPS | (e) Occupation Executive Director |
| B. | (a) Name | |
| | (b) Address (number and street) | |
| | (c) City, State and ZIP Code | |
| | (d) Name of Employer or Principal Place of Business | (e) Occupation |
| C. | (a) Name | |
| | (b) Address (number and street) | |
| | (c) City, State and ZIP Code | |
| | (d) Name of Employer or Principal Place of Business | (e) Occupation |
| D. | (a) Name | |
| | (b) Address (number and street) | |
| | (c) City, State and ZIP Code | |
| | (d) Name of Employer or Principal Place of Business | (e) Occupation |
| E. | (a) Name | |
| | (b) Address (number and street) | |
| | (c) City, State and ZIP Code | |
| | (d) Name of Employer or Principal Place of Business | (e) Occupation |

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

| | |
|---|---|
| <p>A. Full Name (Last, First, Middle Initial) of Payee Upgrade Films</p> <p>Mailing Address of Payee 3299 K Street NW, Ste 200</p> <p>City State Zip Code Washington DC 20007</p> <p>Name of Employer Occupation</p> <p>Purpose of Disbursement (Including title(s) of communication(s)) TV/Media Production (Every Level)</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: <u>HI</u> Barack H. Obama <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President</p> <p>Transaction ID : C.</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p> | <p>Date of Disbursement or Obligation MM / DD / YYYY 01 / 30 / 2012</p> <p>Amount 2885.86</p> <p>Communication Date MM / DD / YYYY 02 / 06 / 2012</p> <p>Transaction ID : E.1</p> <p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> |
| <p>B. Full Name (Last, First, Middle Initial) of Payee Crossroads Media LLC</p> <p>Mailing Address of Payee 66 Canal Center Plaza, Ste 55</p> <p>City State Zip Code Alexandria VA 22314</p> <p>Name of Employer Occupation</p> <p>Purpose of Disbursement (Including title(s) of communication(s)) TV/Media Placement (Every Level)</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: <u>HI</u> Barack H. Obama <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President</p> <p>Transaction ID : C.2</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p> | <p>Date of Disbursement or Obligation MM / DD / YYYY 01 / 26 / 2012</p> <p>Amount 2885.86</p> <p>Communication Date MM / DD / YYYY 02 / 06 / 2012</p> <p>Transaction ID : E.2</p> <p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> |
| <p>SUBTOTAL of Disbursements/Obligations This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)</p> | |