

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name

American Action Network

(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 C00000000

3. Is This Statement

☒

New

or

☐

Amended

4. Covering Period

M M / D D / Y Y Y Y

08 / 20 / 2010

through

M M / D D / Y Y Y Y

08 / 24 / 2010

5. (a) Date of Public Distribution(s) M M / D D / Y Y Y Y

08 / 23 / 2010

(b) Communication Title TV

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: corporation

7. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account?

Yes ☐No ☐

8. Custodian of Records

(a) Name

Stephanie Fenjiro

(b) Address (number and street)

(c) City, State and ZIP Code

Washington

DC

20005

(d) Name of Employer or Principal Place of Business

(e) Occupation

American Action Network

9. Total Donations This Statement

.00

10. Total Disbursements/Obligations This Statement

499895.34

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Stephanie Fenjiro

SIGNATURE Electronically Filed by Stephanie Fenjiro

DATE 08/24/2010

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

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

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11. Person(s) Sharing/Exercising Control

A.	(a) Name Robert Collins	Transaction ID : F91.000001
	(b) Address (number and street)	
	(c) City, State and Zip Code 20005	
	(d) Name of Employer or Principal Place of Business American Action Network	(e) Occupation President

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SCHEDULE 9-B
Disbursement(s) Made or Obligations

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A. Full Name (Last, First, Middle Initial) of Payee UpGrade Films				Date of Disbursement or Obligation M M / D D / Y Y Y Y 08 / 20 / 2010			
Mailing Address of Payee 3299 K street nw ste 200				Amount 14896.34			
City washington	State DC	Zip Code 20007		Communication Date M M / D D / Y Y Y Y 08 / 23 / 2010			
Name of Employer Occupation				Transaction ID : F93.000001			
Purpose of Disbursement (including title(s) of communication(s)) TV spot promise							
Name of Federal Candidate		Office Sought:	House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____		
Name of Federal Candidate		Office Sought:	House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____		
Name of Federal Candidate		Office Sought:	House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____		
B. Full Name (Last, First, Middle Initial) of Payee Crossroads Media				Date of Disbursement or Obligation M M / D D / Y Y Y Y 08 / 20 / 2010			
Mailing Address of Payee 66 Canal Center Plaza, Suite 555,				Amount 484999.00			
City alexandria	State VA	Zip Code 22314		Communication Date M M / D D / Y Y Y Y 08 / 23 / 2010			
Name of Employer Occupation				Transaction ID : F93.000002			
Purpose of Disbursement (including title(s) of communication(s)) TV New Hampshire							
Name of Federal Candidate		Office Sought:	House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____		
Name of Federal Candidate		Office Sought:	House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____		
Name of Federal Candidate		Office Sought:	House Senate President	State: District:	Disbursement/Obligation For: Primary General Other (specify) _____		
SUBTOTAL of Disbursement/Obligation This Page (optional)				499895.34			
TOTAL This Period (last page this line number only) (carry total from last page to line 10)				499895.34			

10030413321

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

☐ Hand Delivered Date of Receipt

☐ USPS First Class Mail Postmarked

☐ USPS Registered/Certified Postmarked (R/C)

☐ USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label ☐

☐ USPS Express Mail Postmarked

☐ Postmark Illegible

☐ No Postmark

☐ Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery ☐

☐ Received from House Records & Registration Office Date of Receipt

☐ Received from Senate Public Records Office Date of Receipt

☐ Received from Electronic Filing Office Date of Receipt

☒ Other (Specify): *Webform #491* Date of Receipt or Postmarked
8/24/10

[Signature] *8/25/10*
PREPARER DATE PREPARED