

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
American Crossroads

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Caleb Crosby

Signature of Treasurer Caleb Crosby [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Crossroads

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="15592293.37"/>	<input type="text" value="15592293.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="24372178.55"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1845169.84"/>	<input type="text" value="1159412.61"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="26217348.39"/>	<input type="text" value="27151705.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="697383.69"/>	<input type="text" value="1631741.28"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="25519964.70"/>	<input type="text" value="25519964.70"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Crossroads

Report Covering the Period: From: / / To: / /

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).....	1832926.60	11524651.60
(ii) Unitemized	11508.00	22798.93
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1844434.60	11547450.53
(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)	1844434.60	11547450.53
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).....	735.24	11962.08
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 Transfers (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))..... ▶	1845169.84	11559412.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1845169.84	11559412.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	692383.69	1623741.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	692383.69	1623741.28
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 Expenditures (use Schedule E)	5000.00	8000.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	697383.69	1631741.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	697383.69	1631741.28

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	1844434.60	11547450.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1844434.60	11547450.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	692383.69	1623741.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	735.24	11962.08
38. Net Operating Expenditures (subtract Line 37 from Line 36)	691648.45	1611779.20

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

Unless otherwise noted, none of the expenditures reported are allocable to a candidate.

Form/Schedule:
Transaction ID:

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 82
(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. ROBERT LACHKY
 Full Name (Last, First, Middle Initial)
 Mailing Address 27 COUNTRYSIDE LANE
 City State Zip Code
 FRONTENAC MO 63131
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RCL GROUP, LLC MARKETING
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2012
Transaction ID : SA11.5384
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. RICHARD RAMKO
 Full Name (Last, First, Middle Initial)
 Mailing Address 941 RUSSELL AVE
 City State Zip Code
 LOS ALTOS CA 94024
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ERNST & YOUNG LLP CPA
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2012
Transaction ID : SA11.5385
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. WILLIAM WITTER
 Full Name (Last, First, Middle Initial)
 Mailing Address 234 S. 68 STREET
 City State Zip Code
 BOULDER CO 80303
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RENTSCHLER & WITTER, LLC MANAGER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 03 / 2012
Transaction ID : SA11.5389
 Amount of Each Receipt this Period
 5000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 6000.00
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 8 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

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

Mailing Address 1505 WATERSIDE DR

City LEAGUE CITY State TX Zip Code 77573

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 Y
 04 / 04 / 2012

Transaction ID : SA11.5394

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. DALE FRUMAN
Full Name (Last, First, Middle Initial)

Mailing Address 3002 HILLCREST LANE

City EXPORT State PA Zip Code 15632

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

Name of Employer CHESTNUT RIDGE COUNSELING CENTER 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 Y
 04 / 05 / 2012

Transaction ID : SA11.5403

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

Mailing Address 1545 BARRINGTON WOODS DRIVE

City BROOKFIELD State WI Zip Code 53045

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

Name of Employer TRICO CORPORATION Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 06 / 2012

Transaction ID : SA11.5406

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	1250.00
TOTAL This Period (last page this line number only).....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. JOSEPH D. DEMAIO
 Full Name (Last, First, Middle Initial)
 Mailing Address 73 CLARK AVE.
 City OCEAN GROVE State NJ Zip Code 07756
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation ORAL SURGEON
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **500.00**

Date of Receipt **04 / 07 / 2012**
Transaction ID : SA11.5409
 Amount of Each Receipt this Period **500.00**
 CONTRIBUTION

B. ROBERT ASKINE
 Full Name (Last, First, Middle Initial)
 Mailing Address 8030 DORIAN WY
 City FAIR OAKS State CA Zip Code 95628
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SACRAMENTO UTILITY DIST Occupation TREE TRIMMER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **250.00**

Date of Receipt **04 / 09 / 2012**
Transaction ID : SA11.5416
 Amount of Each Receipt this Period **250.00**
 CONTRIBUTION

C. SCOTT HARSH
 Full Name (Last, First, Middle Initial)
 Mailing Address 560 4 MILE ROAD
 City CINCINNATI State OH Zip Code 45230
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FUND EVALUATION GROUP Occupation PRESIDENT AND CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 09 / 2012**
Transaction ID : SA11.5398
 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 10 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. THERESA HOWE

Mailing Address 1013 POLO DOWNS DR

City State Zip Code
CHESTERFIELD MO 63017

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 M / D D D / Y Y Y Y Y Y
 04 / 09 / 2012
Transaction ID : SA11.5415

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. LINDA PETERSON

Mailing Address 389 NOTTINGHAM DRIVE

City State Zip Code
AUBURN AL 36830

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 M / D D D / Y Y Y Y Y Y
 04 / 09 / 2012
Transaction ID : SA11.5417

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. BRIAN SLANE

Mailing Address 30250 SANTIAGO RD

City State Zip Code
TEMECULA CA 92592

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

Name of Employer Occupation
ABBOTT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2012
Transaction ID : SA11.5442

Amount of Each Receipt this Period
250.00

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 11 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. LOUIS STOCKTON		Date of Receipt MM / DD / YYYY 04 / 09 / 2012 Transaction ID : SA11.5439
Mailing Address 3355 CERRITOS AVENUE		Amount of Each Receipt this Period 1000.00
City LOS ALAMITOS	State CA	Zip Code 90720
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer STOCKTON ACCOUNTANCY CORPORATION	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. MICHAEL C. STONECIPHER		Date of Receipt MM / DD / YYYY 04 / 09 / 2012 Transaction ID : SA11.5397
Mailing Address 3232 HARDISTY AVE		Amount of Each Receipt this Period 5000.00
City CINCINNATI	State OH	Zip Code 45208
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer FUND EVALUATION GROUP, LLC	Occupation MANAGING PRINCIPLE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) C. LYNN COYLE		Date of Receipt MM / DD / YYYY 04 / 10 / 2012 Transaction ID : SA11.5447
Mailing Address 7500 EAST BOULDERS PARKWAY #6		Amount of Each Receipt this Period 500.00
City SCOTTSDALE	State AZ	Zip Code 85266
FEC ID number of contributing federal political committee. C		CONTRIBUTION
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 ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
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 12 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. DANIEL FINLEY

Mailing Address P.O. BOX 967

City HOUSTON State TX Zip Code 76932

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

Name of Employer PACIFIC OPERATING COMPANY Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2012
Transaction ID : SA11.5445

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. THOMAS GORE

Mailing Address 48 EAST PERIWINKLE LANE

City NEWARK State DE Zip Code 19711

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

Name of Employer N/A Occupation ENTREPRENEUR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2012
Transaction ID : SA11.5452

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MIKE HERNANDEZ

Mailing Address 2505 HWY 360 #600

City GRAND PRAIRIE State TX Zip Code 75050

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

Name of Employer D&M LEASING Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 10 / 2012
Transaction ID : SA11.5453

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	7750.00
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 13 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. MIKE HERNANDEZ
Full Name (Last, First, Middle Initial)

Mailing Address 2505 HWY 360 #600

City GRAND PRAIRIE State TX Zip Code 75050

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

Name of Employer D&M LEASING Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 04 / 10 / 2012
Transaction ID : SA11.5454

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

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

Mailing Address 3201 E PRES GEO BUSH HWY

City RICHARDSON State TX Zip Code 75082

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

Name of Employer METROPLEX FOOT AND ANKLE LLP Occupation PODIATRIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 04 / 11 / 2012
Transaction ID : SA11.5421

Amount of Each Receipt this Period 250.00

CONTRIBUTION

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

Mailing Address 11742 RIVERVIEW DR.

City HOUSTON State TX Zip Code 77077

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 04 / 11 / 2012
Transaction ID : SA11.5422

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A. DENNIS CASSEL
Full Name (Last, First, Middle Initial)

Mailing Address 2467 HOPEWELL ROAD

City MILTON State GA Zip Code 30004

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

Name of Employer INTOWN HOSPITALITY INVESTORS Occupation CHIEF FINANCIAL OFFICER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2012
Transaction ID : SA11.5462

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 163 LOS VIENTOS WAY

City SAN CARLOS State CA Zip Code 94070

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 M / D D D / Y Y Y Y Y Y
 04 / 11 / 2012
Transaction ID : SA11.5427

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. STEPHEN LEWIS
Full Name (Last, First, Middle Initial)

Mailing Address 266 MAIN AVE
APT 5

City NORWALK State CT Zip Code 06851

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 ▼ 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 11 / 2012
Transaction ID : SA11.5436

Amount of Each Receipt this Period
 2000.00

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 15 OF 82
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. WILLIAM NETTLES		Date of Receipt MM / DD / YYYY 04 / 11 / 2012 Transaction ID : SA11.5424
Mailing Address P.O. BOX 2450		Amount of Each Receipt this Period 5000.00
City EDWARDS	State CO	Zip Code 81632
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
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 ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. JAMES OSHAUGHNESSY		Date of Receipt MM / DD / YYYY 04 / 11 / 2012 Transaction ID : SA11.5428
Mailing Address 4 JENIFER LANE		Amount of Each Receipt this Period 2500.00
City COS COB	State CT	Zip Code 06807
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer OSHAUGHNESSY ASSET MANAGEMENT LLC	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. GENE LAWRENCE WEXLER		Date of Receipt MM / DD / YYYY 04 / 11 / 2012 Transaction ID : SA11.5433
Mailing Address 4 HERKIMER ROAD		Amount of Each Receipt this Period 10.00
City SCARSDALE	State NY	Zip Code 10583
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer ASCENA RETAIL GROUP, INC.	Occupation LAWYER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10010.00	

SUBTOTAL of Receipts This Page (optional).....▶	7510.00
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 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. LONG-LEWIS FORD

Mailing Address P.O. BOX 361770

City State Zip Code
HOOVER AL 35236

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 12 / 2012
Transaction ID : SA11.5402

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ROY DORRANCE

Mailing Address 105 SCHENLEY ROAD

City State Zip Code
PITTSBURGH PA 15217

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 Y
 04 / 13 / 2012
Transaction ID : SA11.5472

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. GEOFF HICKS

Mailing Address 11514 ECHO HOLLOW ST.

City State Zip Code
HOUSTON TX 77024

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

Name of Employer Occupation
HICKS AGRIBUSINESS LLC INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 13 / 2012
Transaction ID : SA11.5475

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 4000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 18 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

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

Mailing Address 1511 HICKORY LAKE CT.

City DES MOINES	State IA	Zip Code 50325
--------------------	-------------	-------------------

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

Name of Employer EREFERRAL MARKETING	Occupation SALES
---	---------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2012

Transaction ID : SA11.5495

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. JAY JOLLEY II
Full Name (Last, First, Middle Initial)

Mailing Address 22 MINNEKAHDA PLACE

City CHATTANOOGA	State TN	Zip Code 37405
---------------------	-------------	-------------------

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

Name of Employer CHATTANOOGA ORTHOPEDIC GROUP	Occupation PHYSICIAN
--	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2012

Transaction ID : SA11.5498

Amount of Each Receipt this Period
3000.00

CONTRIBUTION

C. STEVE MCKIBBON
Full Name (Last, First, Middle Initial)

Mailing Address 755 GRAND BLVD
B105-210

City MIRAMAR BEACH	State FL	Zip Code 32550
-----------------------	-------------	-------------------

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 M	/	D D D	/	Y Y Y Y Y Y
04	/	16	/	2012

Transaction ID : SA11.5497

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4500.00
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 19 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. CTK CAPITAL CORPORATION, INC.		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 16 / 2012 Transaction ID : SA11.5499
Mailing Address 6213 SE MAIN STREET		Amount of Each Receipt this Period 2500.00
City PORTLAND	State OR	Zip Code 97215
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. SAMUEL J. FAIELLO		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 17 / 2012 Transaction ID : SA11.5466
Mailing Address 7 SANDY RIDGE RD		Amount of Each Receipt this Period 1000.00
City STOCKTON	State NJ	Zip Code 08559
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SHORE WATER COMPANY	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. AL G. HILL JR.		Date of Receipt M M / D D / Y Y Y Y Y Y 04 / 17 / 2012 Transaction ID : SA11.5465
Mailing Address 47 HIGHLAND PARK VILLAGE SUITE 200		Amount of Each Receipt this Period 100000.00
City DALLAS	State TX	Zip Code 75205
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer A.G. HILL PARTNERS	Occupation PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300000.00	

SUBTOTAL of Receipts This Page (optional).....▶	103500.00
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 20 OF 82
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. JOHN QUINN		Date of Receipt MM / DD / YYYY 04 / 17 / 2012 Transaction ID : SA11.5504
Mailing Address 2415 T AVE, C-64		Amount of Each Receipt this Period 5000.00
City ANACORTES	State WA	Zip Code 98221
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
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 ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. JOHN QUINN		Date of Receipt MM / DD / YYYY 04 / 17 / 2012 Transaction ID : SA11.5505
Mailing Address 2415 T AVE, C-64		Amount of Each Receipt this Period 5000.00
City ANACORTES	State WA	Zip Code 98221
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
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 ▼ 10000.00	

Full Name (Last, First, Middle Initial) C. W. ED BOSARGE		Date of Receipt MM / DD / YYYY 04 / 18 / 2012 Transaction ID : SA11.5476
Mailing Address 4203 YOAKUM BLVD SUITE 200		Amount of Each Receipt this Period 100.00
City HOUSTON	State TX	Zip Code 77006
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer QUANTLAB FINANCIAL	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300000.00	

SUBTOTAL of Receipts This Page (optional).....▶	10100.00
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 21 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A. W. ED BOSARGE
Full Name (Last, First, Middle Initial)

Mailing Address 4203 YOAKUM BLVD
SUITE 200

City HOUSTON State TX Zip Code 77006

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

Name of Employer QUANTLAB FINANCIAL Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300000.00

Date of Receipt
04 / 18 / 2012
Transaction ID : SA11.5477

Amount of Each Receipt this Period
99900.00

CONTRIBUTION

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

Mailing Address 2311 SAHARA DR.

City ARLINGTON State TX Zip Code 76012

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

Name of Employer GARNER LAW FIRM, P.C. Occupation ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 18 / 2012
Transaction ID : SA11.5480

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. JOHN L. KEELEY JR.
Full Name (Last, First, Middle Initial)

Mailing Address 401 SOUTH LASALLE STREET
SUITE 1201

City CHICAGO State IL Zip Code 60605

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

Name of Employer KEELEY ASSET MANAGEMENT CORP Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
04 / 19 / 2012
Transaction ID : SA11.5526

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 101150.00

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 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A. RUSSELL E. PALMER
Full Name (Last, First, Middle Initial)

Mailing Address 210 W. RITTENHOUSE SQUARE
UNIT 1407-08

City PHILADELPHIA State PA Zip Code 19103

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

Name of Employer THE PALMER GROUP Occupation CHAIRMAN AND CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
04 / 19 / 2012
Transaction ID : SA11.5525

Amount of Each Receipt this Period
100000.00

CONTRIBUTION

B. GENE LAWRENCE WEXLER
Full Name (Last, First, Middle Initial)

Mailing Address 4 HERKIMER ROAD

City SCARSDALE State NY Zip Code 10583

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

Name of Employer ASCENA RETAIL GROUP, INC. Occupation LAWYER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10010.00

Date of Receipt
04 / 19 / 2012
Transaction ID : SA11.5522

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

C. LEE RITCHIE
Full Name (Last, First, Middle Initial)

Mailing Address 149 LOCUST FENCE RD.

City ST HELENA IS State SC Zip Code 29920

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
04 / 20 / 2012
Transaction ID : SA11.5565

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 110250.00

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

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

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

FOR LINE NUMBER: PAGE 23 OF 82
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

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

Mailing Address 11414 CREEKWOOD CIR

City State Zip Code
INDIANAPOLIS IN 46239

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

Name of Employer Occupation
THOMAS CABLING INC ELECTRICAL CONTRACTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2012
Transaction ID : SA11.5569

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. THE MCCAFFERY FAMILY TRUST

Mailing Address 360 POETT ROAD

City State Zip Code
HILLSBOROUGH CA 94010

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 20 / 2012
Transaction ID : SA11.5527

Amount of Each Receipt this Period
100000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. NORMAN CHAMBERS

Mailing Address 99 NORTH POST OAK LANE, APT. 1106

City State Zip Code
HOUSTON TX 77024

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

Name of Employer Occupation
NCI BUILDING SYSTEMS INC. CHAIRMAN, PRESIDENT AND CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 21 / 2012
Transaction ID : SA11.5584

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 101250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 OF 82
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. DOUGLAS MACMILLAN
Full Name (Last, First, Middle Initial)

Mailing Address 109 BIRDIE

City WILLIAMSBURG State VA Zip Code 23188

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 Y
 04 / 21 / 2012

Transaction ID : SA11.5578

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. MIKE BLACK
Full Name (Last, First, Middle Initial)

Mailing Address 5622 DYER STREET,SUITE 200

City DALLAS State TX Zip Code 75206

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 ▼ 1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2012

Transaction ID : SA11.5596

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. BRENDA SUSAN DUFF
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 305

City CHAVIES State KY Zip Code 41727

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

Name of Employer PINE BRANCH COAL SALE, INC. Occupation COAL MINING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2510.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 22 / 2012

Transaction ID : SA11.5599

Amount of Each Receipt this Period
 10.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1260.00
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 25 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. BRENDA SUSAN DUFF		Date of Receipt MM / DD / YYYY 04 / 22 / 2012 Transaction ID : SA11.5601
Mailing Address P.O. BOX 305		Amount of Each Receipt this Period 2500.00
City CHAVIES	State KY	Zip Code 41727
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer PINE BRANCH COAL SALE, INC.	Occupation COAL MINING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2510.00	

Full Name (Last, First, Middle Initial) B. TIMOTHY GRIFFY		Date of Receipt MM / DD / YYYY 04 / 22 / 2012 Transaction ID : SA11.5597
Mailing Address 209 LONG CANYON COURT		Amount of Each Receipt this Period 1000.00
City RICHARDSON	State TX	Zip Code 75080
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer ERNST & YOUNG	Occupation CPA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. JAMES LOWRY		Date of Receipt MM / DD / YYYY 04 / 22 / 2012 Transaction ID : SA11.5591
Mailing Address 411 WALNUT STREET, #2001		Amount of Each Receipt this Period 300.00
City GREEN COVE SPRINGS	State FL	Zip Code 32043
FEC ID number of contributing federal political committee. C		CONTRIBUTION
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 ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	3800.00
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 26 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A. ROBERT PEPPERCORN
 Full Name (Last, First, Middle Initial)
 Mailing Address 668 GABRIEL AVENUE
 City YUBA CITY State CA Zip Code 95993
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SUTTER NORTH MEDICAL GROUP Occupation PHYSICIAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **2500.00**

Date of Receipt **04 / 22 / 2012**
Transaction ID : SA11.5594
 Amount of Each Receipt this Period **2500.00**
 CONTRIBUTION

B. CHARLES SENN
 Full Name (Last, First, Middle Initial)
 Mailing Address 4 SAVANNAH RIDGE DRIVE
 City FRISCO State TX Zip Code 75034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation PRIVATE INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **04 / 22 / 2012**
Transaction ID : SA11.5595
 Amount of Each Receipt this Period **1000.00**
 CONTRIBUTION

C. RICHARD BERNSTEIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 611 HARTRANFT AVE
 City FORT WASHINGTON State PA Zip Code 19034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TEMPLE UNIVERSITY Occupation PROFESSOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt **04 / 23 / 2012**
Transaction ID : SA11.5611
 Amount of Each Receipt this Period **500.00**
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. FOWLER BLAUVELT		Date of Receipt MM / DD / YYYY 04 / 23 / 2012
Mailing Address P.O. BOX 472		Transaction ID : SA11.5609
City WALPOLE	State NH	Zip Code 03608
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. WYOMA CRAGHEAD		Date of Receipt MM / DD / YYYY 04 / 24 / 2012
Mailing Address 11394 CR 308		Transaction ID : SA11.5536
City LLANO	State TX	Zip Code 78643
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) C. ROGER A. DORF		Date of Receipt MM / DD / YYYY 04 / 24 / 2012
Mailing Address 13226 SHORE VISTA DRIVE		Transaction ID : SA11.5614
City AUSTIN	State TX	Zip Code 78732
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 15000.00	
Name of Employer AIRWALK COMMUNICATIONS	Occupation EXECUTIVE CHAIRMAN	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

SUBTOTAL of Receipts This Page (optional).....▶	16250.00
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 28 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

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

Mailing Address 4835 APACHE AVE.

City JACKSONVILLE State FL Zip Code 32210

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

Name of Employer STEPHEN D. TRIGG Occupation ORTHOPAEDIC SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2012

Transaction ID : SA11.5539

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

B. STEPHEN TRIGG
Full Name (Last, First, Middle Initial)

Mailing Address 4835 APACHE AVE.

City JACKSONVILLE State FL Zip Code 32210

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

Name of Employer STEPHEN D. TRIGG Occupation ORTHOPAEDIC SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2012

Transaction ID : SA11.5540

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. LYONS BROWN
Full Name (Last, First, Middle Initial)

Mailing Address 657 SO. HURSTBOURNE PKWY #228

City LOUISVILLE State KY Zip Code 40222

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 ▼ 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11.5548

Amount of Each Receipt this Period
 25.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00

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 29 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. LESLIE EDGCOMB III		Date of Receipt MM / DD / YYYY 04 / 25 / 2012 Transaction ID : SA11.5550
Mailing Address 7 CATHEDRAL OAKS		Amount of Each Receipt this Period 100.00
City FAIRPORT	State NY	Zip Code 14450
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RBC	Occupation INVESTMENTS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. LARRY REMENSNYDER		Date of Receipt MM / DD / YYYY 04 / 25 / 2012 Transaction ID : SA11.5544
Mailing Address 251 KING MUIR RD		Amount of Each Receipt this Period 500.00
City LAKE FOREST	State IL	Zip Code 60045
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer POWER SERVICE PRODUCTS, INC.	Occupation REGIONAL SALES MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. HAROLD C. SIMMONS		Date of Receipt MM / DD / YYYY 04 / 25 / 2012 Transaction ID : SA11.5528
Mailing Address 5430 LBJ FWY STE. 1700		Amount of Each Receipt this Period 1000000.00
City DALLAS	State TX	Zip Code 75240
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer CONTRAN CORPORATION	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 6000000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1000600.00
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 30 OF 82
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

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

Mailing Address 1310 STAR DR NE

City ATLANTA State GA Zip Code 30319

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

Name of Employer GREAT TASTE, LLC Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11.5542

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. BILL C WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 108 GANNET COVE

City DUCK State NC Zip Code 27949

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 M / D D D / Y Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11.5545

Amount of Each Receipt this Period
 150.00

CONTRIBUTION

C. BILL C WILSON
Full Name (Last, First, Middle Initial)

Mailing Address 108 GANNET COVE

City DUCK State NC Zip Code 27949

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 M / D D D / Y Y Y Y Y Y
 04 / 25 / 2012

Transaction ID : SA11.5546

Amount of Each Receipt this Period
 100.00

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 31 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. DENNIS CARLYLE

Mailing Address 1611 NORTH BLVD

City HOUSTON State TX Zip Code 77006

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 Y
 04 / 26 / 2012
Transaction ID : SA11.5654

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. BRIAN DUNCAN

Mailing Address 2332 EVERGREEN ST

City PAMPA State TX Zip Code 79065

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

Name of Employer SELF-EMPLOYED Occupation INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 26 / 2012
Transaction ID : SA11.5558

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. VICTOR JURY

Mailing Address P.O. BOX 6409

City ALBUQUERQUE State NM Zip Code 87197

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

Name of Employer SUMMIT ELECTRIC SUPPLY 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 Y Y
 04 / 26 / 2012
Transaction ID : SA11.5650

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	▶	10350.00
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 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A. FREDERICK ROBINSON
Full Name (Last, First, Middle Initial)

Mailing Address 52 NIGHTHAWK DR
BOX 7906

City ASPEN State CO Zip Code 81612

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 ▼
250.00

Date of Receipt
04 / 26 / 2012
Transaction ID : SA11.5556

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. DON HOPMANN
Full Name (Last, First, Middle Initial)

Mailing Address 2704 COUNTY ROAD 237

City ALVIN State TX Zip Code 77511

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

Name of Employer BAKER HUGHES Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
04 / 27 / 2012
Transaction ID : SA11.5666

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. DONALD HOWARD
Full Name (Last, First, Middle Initial)

Mailing Address 10314 SW 23RD COURT

City DAVIE State FL Zip Code 33324

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 ▼
10000.00

Date of Receipt
04 / 27 / 2012
Transaction ID : SA11.5677

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 33 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. ANDREW NEVIN

Mailing Address 72 FACTORY POND ROAD

City State Zip Code
LOCUST VALLEY NY 11560

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

Name of Employer Occupation
HIGHSTAR CAPITAL FINANCE - PRIVATE EQUITY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2012

Transaction ID : SA11.5673

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MARY TRUEBLOOD

Mailing Address 9 BIENVILLE AVE

City State Zip Code
CAPE GIRARDEAU MO 63701

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2012

Transaction ID : SA11.5759

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 9 BIENVILLE AVENUE

City State Zip Code
CAPE GIRARDEAU MO 63701

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

Name of Employer Occupation
ADVANCED ORTHOPEDIC SPECIALISTS ORTHOPEDIC SURGEON

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
04 / 27 / 2012

Transaction ID : SA11.5674

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 34 OF 82
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. SHELLEY BUDIG

Mailing Address 5304 E SILVER SPURS LANE

City SPOKANE State WA Zip Code 99217

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 ▼ **356.00**

Date of Receipt: **04 / 28 / 2012**

Transaction ID : **SA11.5689**

Amount of Each Receipt this Period: **356.60**

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. RALPH DAVID DELANEY

Mailing Address P.O. BOX 1915

City GLENWOOD SPRINGS State CO Zip Code 81602

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

Name of Employer: **PITKIN IRON CORP** Occupation: **BOOKKEEPER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt: **04 / 28 / 2012**

Transaction ID : **SA11.5699**

Amount of Each Receipt this Period: **100.00**

CONTRIBUTION

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

Mailing Address 306 WHISPERING HILLS

City HOT SPRINGS State AR Zip Code 71901

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: **04 / 28 / 2012**

Transaction ID : **SA11.5695**

Amount of Each Receipt this Period: **500.00**

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... **956.60**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A. CHARLES R. HAMIL
Full Name (Last, First, Middle Initial)

Mailing Address 5910 W LONEWOLF AVE

City SPOKANE State WA Zip Code 99208

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

Name of Employer DASH CONNECTOR TECHNOLOGY, INC Occupation QA MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 28 / 2012
Transaction ID : SA11.5698

Amount of Each Receipt this Period 100.00

CONTRIBUTION

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

Mailing Address 2011 CREST DR

City ENCINITAS State CA Zip Code 92024

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 ▼ 400.00

Date of Receipt 04 / 28 / 2012
Transaction ID : SA11.5696

Amount of Each Receipt this Period 100.00

CONTRIBUTION

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

Mailing Address 2327 GOLF CLUB LANE

City NASHVILLE State TN Zip Code 37215

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 04 / 29 / 2012
Transaction ID : SA11.5703

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 700.00

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 36 OF 82
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. LYONS BROWN

Mailing Address **657 SO. HURSTBOURNE PKWY #228**

City LOUISVILLE	State KY	Zip Code 40222
---------------------------	--------------------	--------------------------

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 ▼
25000.00

Date of Receipt
04 / 30 / 2012

Transaction ID : SA11.5708

Amount of Each Receipt this Period
24975.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. ROBERT H. HARRIS

Mailing Address **2137 ROUTE 35**

City HOLMDEL	State NJ	Zip Code 07733
------------------------	--------------------	--------------------------

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

Name of Employer HARRIS FRC CORPORATION	Occupation PRESIDENT
---	--------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt
04 / 30 / 2012

Transaction ID : SA11.5635

Amount of Each Receipt this Period
250000.00

CONTRIBUTION

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

Mailing Address **35491 RUNNING BROOK LN.**

City ELIZABETH	State CO	Zip Code 80107
--------------------------	--------------------	--------------------------

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
04 / 30 / 2012

Transaction ID : SA11.5707

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	275975.00
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 OF 82
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
735.24

Date of Receipt
 M M / D D / Y Y Y Y
 04 / 20 / 2012

Transaction ID : SA15.1599

Amount of Each Receipt this Period
735.24

REFUND - PAYROLL TAXES OVERPAYMENT

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	735.24
TOTAL This Period (last page this line number only).....▶	735.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. MERCHANT PAYMENT SERVICES

Mailing Address 7300 CHAPMAN HIGHWAY

City KNOXVILLE State TN Zip Code 37920

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 02 / 2012

Transaction ID : SB21B.I1536

Amount of Each Disbursement this Period

55.00

Full Name (Last, First, Middle Initial)

B. MELLON BANK

Mailing Address P.O. BOX 535416

City PITTSBURGH State PA Zip Code 15253

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2012

Transaction ID : SB21B.I1532

Amount of Each Disbursement this Period

1386.25

Full Name (Last, First, Middle Initial)

C. MELLON BANK

Mailing Address P.O. BOX 535416

City PITTSBURGH State PA Zip Code 15253

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 04 / 2012

Transaction ID : SB21B.I1533

Amount of Each Disbursement this Period

540.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1981.25

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. ANDREW FINNAN

Mailing Address 2130 P STREET NW #406

City WASHINGTON State DC Zip Code 20037-1017

Purpose of Disbursement
CONSULTING, MEDIA

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1461

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1495

Amount of Each Disbursement this Period

480.09

Full Name (Last, First, Middle Initial)

C. PAUL MOUTON

Mailing Address P.O. BOX 545

City CARTHAGE State MO Zip Code 64836

Purpose of Disbursement
CONSULTING, RESEARCH

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1494

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10480.09

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. 1401 NEW YORK AVENUE INC

Mailing Address P.O. BOX 7247-7375

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1501

Amount of Each Disbursement this Period

3941.73

Full Name (Last, First, Middle Initial)

B. ACCION INTERNATIONAL

Mailing Address 56 ROLAND STREET, STE 300

City BOSTON State MA Zip Code 02129

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1502

Amount of Each Disbursement this Period

3600.00

Full Name (Last, First, Middle Initial)

C. ADP INC

Mailing Address 504 CLINTON CENTER DRIVE, STE 4400

City CLINTON State MS Zip Code 39056

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1503

Amount of Each Disbursement this Period

109.25

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7650.98

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. ALLIED TELECOM

Mailing Address 1120 20TH STREET NW, STE 500-S

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
INTERNET AND TELEPHONE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1505

Amount of Each Disbursement this Period

1100.00

Full Name (Last, First, Middle Initial)

B. ATCHLEY & ASSOCIATES

Mailing Address 6850 AUSTIN CENTER BLVD, STE 180

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1507

Amount of Each Disbursement this Period

9041.14

Full Name (Last, First, Middle Initial)

C. BLACK ROCK GROUP LLC

Mailing Address 66 CANAL CENTER PLAZA, STE 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING, ADVOCACY COMMUNICATION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1508

Amount of Each Disbursement this Period

7596.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

17737.14

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. BROOK FURNITURE RENTAL

Mailing Address 24997 NETWORK PLACE

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement
OFFICE FURNITURE RENTAL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1509

Amount of Each Disbursement this Period

634.84

Full Name (Last, First, Middle Initial)

B. FRANK PARSONS

Mailing Address P.O. BOX 791416

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1522

Amount of Each Disbursement this Period

423.31

Full Name (Last, First, Middle Initial)

C. HYNES COMMUNICATIONS

Mailing Address 121 BOW STREET, STE 6

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1526

Amount of Each Disbursement this Period

9000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10058.15

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. MDC & ASSOCIATES INC

Mailing Address 5013 COACHMANS CARRIAGE TERRACE

City State Zip Code
GLEN ALLEN VA 23059

Purpose of Disbursement
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District: 00

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1531

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. NATIONAL JOURNAL GROUP INC

Mailing Address P.O. BOX 64408

City State Zip Code
BALTIMORE MD 21264

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District: 00

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1539

Amount of Each Disbursement this Period

9793.34

Full Name (Last, First, Middle Initial)

C. RICHARD SALES MEDIA LLC

Mailing Address 9010 S. 10TH ST.

City State Zip Code
PHOENIX AZ 85042

Purpose of Disbursement
WEB VIDEO

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District: 00

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1549

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

13293.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. ROCK CREEK ADVISORS LLC

Mailing Address 5331 16TH STREET NW

City WASHINGTON State DC Zip Code 20011

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1551

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 3986

City WASHINGTON State DC Zip Code 20027

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1555

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C. THE MK GROUP LLC

Mailing Address 5905 GLOSTER ROAD

City BETHESDA State MD Zip Code 20816

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1557

Amount of Each Disbursement this Period

7500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

18000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. THE TARRANCE GROUP INC

Mailing Address 201 N. UNION STREET, STE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
SURVEY / POLLING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1558

Amount of Each Disbursement this Period

77000.00

Full Name (Last, First, Middle Initial)

B. TRAY

Mailing Address P.O. BOX 1360

City GLEN BURNIE State MD Zip Code 21061

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 06 / 2012

Transaction ID : SB21B.I1559

Amount of Each Disbursement this Period

1325.47

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND STREET, 1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
WEB SERVICE FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1543

Amount of Each Disbursement this Period

29.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

78354.47

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. SYSTEM PARKING CORP

Mailing Address 2300 M ST NW #900

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1552

Amount of Each Disbursement this Period

560.00

Full Name (Last, First, Middle Initial)

B. VISA

Mailing Address P.O. 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: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1565

Amount of Each Disbursement this Period

3028.75

Full Name (Last, First, Middle Initial)

C. AT&T DATA

Mailing Address P.O. BOX 6416

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1570

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3588.75

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1572

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CUSTOM SCOOP

Mailing Address P.O. BOX 609

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1574

Amount of Each Disbursement this Period

407.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DATAWATCH SYSTEMS INC

Mailing Address 4401 EAST WEST HIGHWAY #500

City BETHESDA State MD Zip Code 20814

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1575

Amount of Each Disbursement this Period

14.54

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. DATAWATCH SYSTEMS INC

Mailing Address 4401 EAST WEST HIGHWAY #500

City BETHESDA State MD Zip Code 20814

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1576

Amount of Each Disbursement this Period

38.92

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DATAWATCH SYSTEMS INC

Mailing Address 4401 EAST WEST HIGHWAY #500

City BETHESDA State MD Zip Code 20814

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1577

Amount of Each Disbursement this Period

52.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address P.O. BOX 371461

City PITTSBURGH State PA Zip Code 15250

Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1580

Amount of Each Disbursement this Period

241.39

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. HILTON HOTEL

Mailing Address 7930 JONES BRANCH DR #1100

City State Zip Code
MCLEAN VA 22102

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1582

Amount of Each Disbursement this Period

102.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. PREMIERE GLOBAL SERVICES INC

Mailing Address 3399 PEACHTREE ROAD, STE 700

City State Zip Code
ATLANTA GA 30326-2832

Purpose of Disbursement
CONFERENCE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1583

Amount of Each Disbursement this Period

86.48

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SOUTHWEST AIRLINES

Mailing Address P.O. BOX 36647-1CR

City State Zip Code
DALLAS TX 75235

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1586

Amount of Each Disbursement this Period

586.30

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. TOP OF THE HILL AT ROA LLC

Mailing Address ONE CONSTITUTION AVENUE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
MEETING EXPENSE - FOOD / BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1588

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1589

Amount of Each Disbursement this Period

303.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1590

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. VISA

Mailing Address P.O. BOX 4513

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I1566

Amount of Each Disbursement this Period

7	2	6	.	7	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. AT&T DATA

Mailing Address P.O. BOX 6416

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I1591

Amount of Each Disbursement this Period

2	5	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T DATA

Mailing Address P.O. BOX 6416

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I1592

Amount of Each Disbursement this Period

2	5	.	0	0
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[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7	2	6	.	7	0
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. AT&T DATA

Mailing Address P.O. BOX 6416

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1593

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AT&T DATA

Mailing Address P.O. BOX 6416

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1594

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CEO UPDATE

Mailing Address 1990 M ST NW, 8TH FLOOR

City State Zip Code
WASHINGTON DC 20036

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1595

Amount of Each Disbursement this Period

395.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

0.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 09 / 2012

Transaction ID : SB21B.I1598

Amount of Each Disbursement this Period

177.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CROSSROADS MEDIA LLC

Mailing Address 66 CANAL CENTER PLAZA, SUITE 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MEDIA PLACEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2012

Transaction ID : SB21B.I1517

Amount of Each Disbursement this Period

160179.35

Full Name (Last, First, Middle Initial)

C. ALLIED TELECOM

Mailing Address 1120 20TH STREET NW, STE 500-S

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
INTERNET AND TELEPHONE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2012

Transaction ID : SB21B.I1506

Amount of Each Disbursement this Period

584.48

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

160763.83

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. CAREFIRST BCBS

Mailing Address P.O. BOX 79749

City State Zip Code
BALTIMORE MD 21279

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	2

Transaction ID : SB21B.I1512

Amount of Each Disbursement this Period

7	5	7	6	.	1	5
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. CFC CONSULTING INC

Mailing Address 3724 DUNBARTON DRIVE

City State Zip Code
MOUNTAIN BROOK AL 35223

Purpose of Disbursement
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	2

Transaction ID : SB21B.I1513

Amount of Each Disbursement this Period

5	6	7	9	.	8	6
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. DATAWATCH SYSTEMS INC

Mailing Address 4401 EAST WEST HIGHWAY #500

City State Zip Code
BETHESDA MD 20814

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	3		2	0	1	2

Transaction ID : SB21B.I1518

Amount of Each Disbursement this Period

1	9	7	7	.	9	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	5	2	3	3	.	9	1
---	---	---	---	---	---	---	---

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. HACKNEY & HACKNEY

Mailing Address 1407 W. 31ST AVE, STE 100

City ANCHORAGE State AK Zip Code 99503

Purpose of Disbursement
RADIO PRODUCTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I1524**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. LEXISNEXIS

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I1529**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. MCKENNA & ASSOCIATES LLC

Mailing Address 2321 NORTH KENTUCKY ST.

City ARLINGTON State VA Zip Code 22205

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I1530**

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)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. SYSTEM PARKING CORP

Mailing Address 2300 M ST NW #900

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2012

Transaction ID : SB21B.I1553

Amount of Each Disbursement this Period

530.00

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address P.O. BOX 2187

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
WEBSITE HOSTING / DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2012

Transaction ID : SB21B.I1554

Amount of Each Disbursement this Period

51000.00

Full Name (Last, First, Middle Initial)

C. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 3986

City WASHINGTON State DC Zip Code 20027

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2012

Transaction ID : SB21B.I1556

Amount of Each Disbursement this Period

3119.24

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

54649.24

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : **SB21B.I1468**

Amount of Each Disbursement this Period

1102.51

Full Name (Last, First, Middle Initial)

B. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : **SB21B.I1478**

Amount of Each Disbursement this Period

1283.34

Full Name (Last, First, Middle Initial)

C. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : **SB21B.I1472**

Amount of Each Disbursement this Period

689.49

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3075.34

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : **SB21B.I1470**

Amount of Each Disbursement this Period

1654.25

Full Name (Last, First, Middle Initial)

B. NATHAN HODSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : **SB21B.I1492**

Amount of Each Disbursement this Period

445.47

Full Name (Last, First, Middle Initial)

C. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : **SB21B.I1496**

Amount of Each Disbursement this Period

3056.44

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

5156.16

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1459

Amount of Each Disbursement this Period

2245.99

Full Name (Last, First, Middle Initial)

B. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1466

Amount of Each Disbursement this Period

4236.88

Full Name (Last, First, Middle Initial)

C. JOHN MILAM

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1476

Amount of Each Disbursement this Period

1336.57

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

7819.44

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. LLOYD MILLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1488

Amount of Each Disbursement this Period

1721.64

Full Name (Last, First, Middle Initial)

B. ANDREW MOORE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1462

Amount of Each Disbursement this Period

1160.59

Full Name (Last, First, Middle Initial)

C. JENNIFER MUELLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1474

Amount of Each Disbursement this Period

1415.22

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

4297.45

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1482

Amount of Each Disbursement this Period

337.89

Full Name (Last, First, Middle Initial)

B. ANNA ROGERS

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1464

Amount of Each Disbursement this Period

1383.75

Full Name (Last, First, Middle Initial)

C. KYLE SISENSTEIN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1486

Amount of Each Disbursement this Period

1156.40

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2878.04

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. THEODORE TANZER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1499

Amount of Each Disbursement this Period

1236.96

Full Name (Last, First, Middle Initial)

B. MATTHEW WALL

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1490

Amount of Each Disbursement this Period

1628.66

Full Name (Last, First, Middle Initial)

C. KIRK WHITWORTH

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1484

Amount of Each Disbursement this Period

1442.23

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

4307.85

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. ADP INC

Mailing Address 504 CLINTON CENTER DRIVE, STE 4400

City CLINTON State MS Zip Code 39056

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1504

Amount of Each Disbursement this Period

129.50

Full Name (Last, First, Middle Initial)

B. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1515

Amount of Each Disbursement this Period

109.31

Full Name (Last, First, Middle Initial)

C. DEPARTMENT OF EMPLOYMENT SERVICES

Mailing Address P.O. BOX 9664

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1519

Amount of Each Disbursement this Period

122.12

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

360.93

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. MISSISSIPPI DEPT OF REVENUE

Mailing Address P.O. BOX 23075

City JACKSON State MS Zip Code 39225

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1537

Amount of Each Disbursement this Period

78.00

Full Name (Last, First, Middle Initial)

B. OFFICE OF TAX AND REVENUE

Mailing Address P.O. BOX 96385

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1541

Amount of Each Disbursement this Period

1532.19

Full Name (Last, First, Middle Initial)

C. US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1561

Amount of Each Disbursement this Period

8697.11

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

10307.30

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2012

Transaction ID : SB21B.I1563

Amount of Each Disbursement this Period

297.36

Full Name (Last, First, Middle Initial)

B. MELLON BANK

Mailing Address P.O. BOX 535416

City PITTSBURGH State PA Zip Code 15253

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 19 / 2012

Transaction ID : SB21B.I1534

Amount of Each Disbursement this Period

1136.25

Full Name (Last, First, Middle Initial)

C. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT - FOOD & BEVERAGE / TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2012

Transaction ID : SB21B.I1479

Amount of Each Disbursement this Period

764.97

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2198.58

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	2

Transaction ID : **SB21B.I1497**

Amount of Each Disbursement this Period

1	1	4	6	6
---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. BROOK FURNITURE RENTAL

Mailing Address 24997 NETWORK PLACE

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement
OFFICE FURNITURE RENTAL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	2

Transaction ID : **SB21B.I1510**

Amount of Each Disbursement this Period

9	0	8	.	6	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. CAPITOL COMPUTER EXPERTS

Mailing Address 9700-G MARTIN LUTHER KING JR. HIGH

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECH SUPP / OFFICE EQUIP PURCHASE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	3		2	0	1	2

Transaction ID : **SB21B.I1511**

Amount of Each Disbursement this Period

4	3	6	.	4	4
---	---	---	---	---	---

SUBTOTAL of Disbursements This Page (optional)..... ▶

5	3	8	.	3	7	0
---	---	---	---	---	---	---

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

5	3	8	.	3	7	0
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD N, STE 270

City ST. PAUL State MN Zip Code 55128

Purpose of Disbursement
CONFERENCE CALLS

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SB21B.I1521

Amount of Each Disbursement this Period

397.36

Full Name (Last, First, Middle Initial)

B. FRANK PARSONS

Mailing Address P.O. BOX 791416

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SB21B.I1523

Amount of Each Disbursement this Period

320.09

Full Name (Last, First, Middle Initial)

C. KONICA MINOLTA BUSINESS SOLUTIONS

Mailing Address P.O. BOX 122366

City DALLAS State TX Zip Code 75312

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 23 / 2012

Transaction ID : SB21B.I1528

Amount of Each Disbursement this Period

230.65

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

948.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. NMB RESEARCH

Mailing Address 206 N. FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
RESEARCH SERVICES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2012

Transaction ID : SB21B.I1540

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. PRINCIPAL FINANCIAL GROUP

Mailing Address P.O. BOX 10372

City DES MOINES State IA Zip Code 50306

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2012

Transaction ID : SB21B.I1546

Amount of Each Disbursement this Period

456.97

Full Name (Last, First, Middle Initial)

C. PUBLIC OPINION STRATEGIES

Mailing Address 214 NORTH FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 23 / 2012

Transaction ID : SB21B.I1547

Amount of Each Disbursement this Period

69250.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

79706.97

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. VOTER CONSUMER RESEARCH INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		23		2012

Mailing Address 501 C STREET NE

Transaction ID : SB21B.I1567

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

27655.67

Purpose of Disbursement
POLLING

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Full Name (Last, First, Middle Initial)

B. CFL ASSOCIATES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2012

Mailing Address 4189 S FOUR MILE RUN DRIVE #404

Transaction ID : SB21B.I1514

City ARLINGTON State VA Zip Code 22204

Amount of Each Disbursement this Period

89.07

Purpose of Disbursement
DONOR DEVELOPMENT

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL JOSEFIK PLLC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		26		2012

Mailing Address 45 NORTH HILL DRIVE, SUITE 100

Transaction ID : SB21B.I1525

City WARRENTON State VA Zip Code 20186

Amount of Each Disbursement this Period

25046.25

Purpose of Disbursement
LEGAL SERVICES

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

SUBTOTAL of Disbursements This Page (optional)..... ▶

52790.99

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. PUBLIC OPINION STRATEGIES

Mailing Address 214 NORTH FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2012

Transaction ID : SB21B.I1548

Amount of Each Disbursement this Period

23000.00

Full Name (Last, First, Middle Initial)

B. RICHARD SALES MEDIA LLC

Mailing Address 9010 S. 10TH ST.

City PHOENIX State AZ Zip Code 85042

Purpose of Disbursement
WEB VIDEO

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2012

Transaction ID : SB21B.I1550

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. UPGRADE FILMS

Mailing Address 3299 K STREET NW, STE 200

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
TV / MEDIA PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2012

Transaction ID : SB21B.I1560

Amount of Each Disbursement this Period

13233.87

SUBTOTAL of Disbursements This Page (optional)..... ▶

38233.87

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

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. WILSON-GRAND COMMUNICATIONS

Mailing Address 429 N. ST. ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TV / MEDIA PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 26 / 2012

Transaction ID : SB21B.I1568

Amount of Each Disbursement this Period

17360.00

Full Name (Last, First, Middle Initial)

B. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1469

Amount of Each Disbursement this Period

1102.51

Full Name (Last, First, Middle Initial)

C. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1480

Amount of Each Disbursement this Period

1283.35

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

19745.86

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SB21B.I1473

Amount of Each Disbursement this Period

689.50

Full Name (Last, First, Middle Initial)

B. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SB21B.I1471

Amount of Each Disbursement this Period

1654.24

Full Name (Last, First, Middle Initial)

C. NATHAN HODSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SB21B.I1493

Amount of Each Disbursement this Period

466.21

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2809.95

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SB21B.I1498

Amount of Each Disbursement this Period

3056.44

Full Name (Last, First, Middle Initial)

B. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SB21B.I1460

Amount of Each Disbursement this Period

2398.12

Full Name (Last, First, Middle Initial)

C. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : SB21B.I1467

Amount of Each Disbursement this Period

4079.32

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

9533.88

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. JOHN MILAM

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : **SB21B.I1477**

Amount of Each Disbursement this Period

1336.56

Full Name (Last, First, Middle Initial)

B. LLOYD MILLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : **SB21B.I1489**

Amount of Each Disbursement this Period

1721.63

Full Name (Last, First, Middle Initial)

C. ANDREW MOORE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 30 / 2012

Transaction ID : **SB21B.I1463**

Amount of Each Disbursement this Period

1160.59

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

4218.78

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. JENNIFER MUELLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1475

Amount of Each Disbursement this Period

1415.21

Full Name (Last, First, Middle Initial)

B. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1483

Amount of Each Disbursement this Period

337.91

Full Name (Last, First, Middle Initial)

C. KARA OSBORNE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1481

Amount of Each Disbursement this Period

645.29

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

2398.41

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. ANNA ROGERS

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1465

Amount of Each Disbursement this Period

1383.74

Full Name (Last, First, Middle Initial)

B. KYLE SISENSTEIN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1487

Amount of Each Disbursement this Period

1156.40

Full Name (Last, First, Middle Initial)

C. THEODORE TANZER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1500

Amount of Each Disbursement this Period

1236.96

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3777.10

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. MATTHEW WALL

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1491

Amount of Each Disbursement this Period

1628.66

Full Name (Last, First, Middle Initial)

B. KIRK WHITWORTH

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1485

Amount of Each Disbursement this Period

1442.22

Full Name (Last, First, Middle Initial)

C. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1516

Amount of Each Disbursement this Period

109.31

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3180.19

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF EMPLOYMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2012

Mailing Address P.O. BOX 9664

Transaction ID : SB21B.I1520

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

123.33

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Full Name (Last, First, Middle Initial)

B. MELLON BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2012

Mailing Address P.O. BOX 535416

Transaction ID : SB21B.I1535

City PITTSBURGH State PA Zip Code 15253

Amount of Each Disbursement this Period

886.25

Purpose of Disbursement
HEALTH INSURANCE

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Full Name (Last, First, Middle Initial)

C. MISSISSIPPI DEPT OF REVENUE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		30		2012

Mailing Address P.O. BOX 23075

Transaction ID : SB21B.I1538

City JACKSON State MS Zip Code 39225

Amount of Each Disbursement this Period

78.00

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

SUBTOTAL of Disbursements This Page (optional)..... ▶

1087.58

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. OFFICE OF TAX AND REVENUE

Mailing Address P.O. BOX 96385

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1542

Amount of Each Disbursement this Period

1566.41

Full Name (Last, First, Middle Initial)

B. PIRYX INC

Mailing Address 144 2ND STREET, 1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
WEB SERVICE FEES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1544

Amount of Each Disbursement this Period

10386.81

Full Name (Last, First, Middle Initial)

C. PNC BANK

Mailing Address ONE FINANCIAL PARKWAY

City KALAMAZOO State MI Zip Code 49009

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2012

Transaction ID : SB21B.I1545

Amount of Each Disbursement this Period

217.02

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

12170.24

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		3	0		2	0	1	2		

Transaction ID : SB21B.I1562

Amount of Each Disbursement this Period

8	8	4	6	.	4	6
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Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	4		3	0		2	0	1	2		

Transaction ID : SB21B.I1564

Amount of Each Disbursement this Period

2	9	7	.	3	6
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Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

9	1	4	3	.	8	2
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6	9	2	3	8	2	.	9	2
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