

A. Form/Schedule : **F3XN**

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

Transaction ID :

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
American Crossroads

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
1	3

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		758335.36
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	758335.36									
(c) Total Receipts (from Line 19)	3824628.41	3824628.41								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	4582963.77	4582963.77								
7. Total Disbursements (from Line 31)	1290212.07	1290212.07								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3292751.70	3292751.70								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
American Crossroads

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
1	3

Y	Y	Y	Y
2	0	1	1

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)	3794250.00	3794250.00
(ii) Unitemized	3695.00	3695.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3797945.00	3797945.00
(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)	3797945.00	3797945.00
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)	26683.41	26683.41
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3824628.41	3824628.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3824628.41	3824628.41

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	599846.37	599846.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	599846.37	599846.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	690365.70	690365.70
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1290212.07	1290212.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1290212.07	1290212.07

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)	3797945.00	3797945.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3797945.00	3797945.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	599846.37	599846.37
37. Offsets to Operating Expenditures (from Line 15, page 3)	26683.41	26683.41
38. Net Operating Expenditures (subtract Line 37 from Line 36)	573162.96	573162.96

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 130
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Crossroads

A.

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

Mailing Address 16 COACHLIGHT DRIVE

City State Zip Code
POUGHKEEPSIE NY 12603-4241

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 01 / 2011

Transaction ID: SA11.4333

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

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

Mailing Address 43 JEFFREY ROAD

City State Zip Code
WAYLAND MA 01778-2505

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

Name of Employer Occupation
FMRCO. MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
04 / 29 / 2011

Transaction ID: SA11.4393

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C.

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

Mailing Address 14151 WOODVIEW LANE

City State Zip Code
SARATOGA CA 95070-5553

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

Name of Employer Occupation
INFO REQUESTED INFO REQUESTED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 10 / 2011

Transaction ID: SA11.4383

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

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

Mailing Address 11921 GRANDVIEW

City State Zip Code
COLUMBUS IN 47201-8957

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

Name of Employer HOOSIER PATHOLOGY Occupation PATHOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
05 / 18 / 2011

Transaction ID: SA11.4401

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
LEO W. COOK

Mailing Address 74615 WREN DRIVE

City State Zip Code
INDIAN WELLS CA 92210-7363

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
MM / DD / YYYY
05 / 09 / 2011

Transaction ID: SA11.4411

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

Mailing Address 3525 21ST STREET, SE

City State Zip Code
WASHINGTON DC 20020-6110

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

Name of Employer NOMURA Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
03 / 11 / 2011

Transaction ID: SA11.4387

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

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

Mailing Address 266 MAIN AVE, APT 5

City NORWALK State CT Zip Code 06851-6126

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 04 / 07 / 2011
Transaction ID: SA11.4357
 Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

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

Mailing Address PO BOX 176

City ABILENE State TX Zip Code 79604-0176

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 ▼ 100000.00

Date of Receipt: 02 / 28 / 2011
Transaction ID: SA11.4391
 Amount of Each Receipt this Period: 100000.00
CONTRIBUTION

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

Mailing Address 560 DIAMOND POINT

City OAK POINT State TX Zip Code 75068-2256

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 01 / 2011
Transaction ID: SA11.4327
 Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 102000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 130
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
DR. RICHARD E. PAULUS

Mailing Address 110 VALLEY VIEW DRIVE

City State Zip Code
COAL GROVE OH 45638-3061

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

Name of Employer Occupation
CUMBERLAND CARDIOLOGY PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

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

Transaction ID: SA11.4409

Amount of Each Receipt this Period
50000.00

CONTRIBUTION

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

Mailing Address P.O. BOX 34153

City State Zip Code
HOUSTON TX 77234-4153

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

Name of Employer Occupation
PERRY HOMES HOME BUILDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500000.00

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

Transaction ID: SA11.4390

Amount of Each Receipt this Period
500000.00

CONTRIBUTION

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

Mailing Address 1306 MERIDEN LANE

City State Zip Code
AUSTIN TX 78703-3827

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

Name of Employer Occupation
ZILLIANT, INC. EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

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

Transaction ID: SA11.4398

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 560000.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 130

(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

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

Mailing Address 2900 TARRY TRAIL

City State Zip Code
AUSTIN TX 78703-1153

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

Name of Employer Occupation
ATLANTIC TRUST MANAGING DIRECTOR

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

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 0 8 / 2 0 1 1

Transaction ID: SA11.4396

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

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

Mailing Address 600 EAST LAS COLINAS BLVD.
STE. 1900

City State Zip Code
IRVING TX 75039-5601

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

Name of Employer Occupation
TRT HOLDINGS INC. CEO

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt

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

Transaction ID: SA11.4412

Amount of Each Receipt this Period

1000000.00

CONTRIBUTION

C.

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

Mailing Address 334 BEECHWOOD RD
SUITE 400

City State Zip Code
FORT MITCHELL KY 41017-2086

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
0 3 / 1 7 / 2 0 1 1

Transaction ID: SA11.4349

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1011000.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: PAGE 12 / 130

(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

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

Mailing Address 3657 BIRCHWOOD ROAD

City State Zip Code
SAUKVILLE WI 53080-1449

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

Name of Employer Occupation
INFO REQUESTED INFO REQUESTED

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

Date of Receipt

M M / D D / Y Y Y Y
03 / 03 / 2011

Transaction ID: SA11.4370

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
NAV SOOCH

Mailing Address 901 W. 9TH STREET
#1102

City State Zip Code
AUSTIN TX 78703-4641

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

Name of Employer Occupation
SELF-EMPLOYED ENGINEER

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

Date of Receipt

M M / D D / Y Y Y Y
05 / 08 / 2011

Transaction ID: SA11.4397

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
WHITNEY SOOCH

Mailing Address 901 W. 9TH STREET
#1102

City State Zip Code
AUSTIN TX 78703-4641

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

Name of Employer Occupation
INFO REQUESTED INFO REQUESTED

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

Date of Receipt

M M / D D / Y Y Y Y
05 / 08 / 2011

Transaction ID: SA11.4397.1

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

11000.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 130
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) PETER SWENSON		Date of Receipt
	Mailing Address P.O. BOX 8		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	TILDEN	TX	78072-0008
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.4371
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) PETER TURCIC		Date of Receipt
	Mailing Address 5 CHEROKEE TRAIL		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	ELKVIEW	WV	25071-9263
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.4372
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) F. GIFFORD WELDON		Date of Receipt
	Mailing Address 1994 THATCH PALM DR.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	BOCA RATON	FL	33432-7457
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.4373
Name of Employer INFO REQUESTED		Occupation INFO REQUESTED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 6000.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 130

(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
FORESIGHT MANAGEMENT LLC

Mailing Address 430 HARPER PARK DRIVE

City State Zip Code
BECKLEY WV 25801-2663

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

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

Transaction ID: SA11.4389

Amount of Each Receipt this Period

100000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
JERRY PERENCHIO LIVING TRUST

Mailing Address 1999 AVENUE OF THE STARS
STE. 3050

City State Zip Code
LOS ANGELES CA 90067-4613

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000000.00

Date of Receipt

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

Transaction ID: SA11.4408

Amount of Each Receipt this Period

2000000.00

CONTRIBUTION

C.

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

Mailing Address 2551 JOHN HAWKINS PARKWAY

City State Zip Code
HOOVER AL 35244-3533

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11.4410

Amount of Each Receipt this Period

1500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2101500.00

TOTAL This Period (last page this line number only)

3794250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 130
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial) Emotive, LLC		Date of Receipt MM / DD / YYYY 06 / 13 / 2011
Mailing Address 2800 Shirlington Road Ste. 901		Transaction ID: Emo1
City Arlington	State VA	Zip Code 22206
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2750.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2750.00	

B.

Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.		Date of Receipt MM / DD / YYYY 06 / 13 / 2011
Mailing Address 600 Fairmont Avenue Ste. 306		Transaction ID: Ment1
City Towson	State MD	Zip Code 21286
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23609.01
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 23933.41	

C.

Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.		Date of Receipt MM / DD / YYYY 06 / 13 / 2011
Mailing Address 600 Fairmont Avenue Ste. 306		Transaction ID: Ment2
City Towson	State MD	Zip Code 21286
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 324.40
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 23933.41	

SUBTOTAL of Receipts This Page (optional)	26683.41
TOTAL This Period (last page this line number only)	26683.41

**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

A.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10142 Date of Disbursement 01 / 14 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 3640.66
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10153 Date of Disbursement 01 / 31 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 2913.66
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10164 Date of Disbursement 02 / 15 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 1622.21
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	8176.53
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10172 Date of Disbursement 02 / 28 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 895.21
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10181 Date of Disbursement 03 / 15 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 1622.21
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10189 Date of Disbursement 03 / 31 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 895.21
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3412.63
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10197 Date of Disbursement 04 / 15 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 1622.21
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10205 Date of Disbursement 04 / 30 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 895.21
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10228 Date of Disbursement 05 / 13 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 1622.21
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	4139.63
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 10236 Date of Disbursement 05 / 31 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 895.21
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 5318 Date of Disbursement 04 / 04 / 2011
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 220.38
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Reimb., travel, mtg. exp., food & bev.	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Leslie Hagar	Transaction ID: 10143 Date of Disbursement 01 / 14 / 2011
	Mailing Address 100 I Street, SE Apt. 710	Amount of Each Disbursement this Period 967.31
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2082.90
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 100 I Street, SE Apt. 710</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10154 Date of Disbursement 01 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 967.30</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 100 I Street, SE Apt. 710</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10165 Date of Disbursement 02 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 430.70</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 100 I Street, SE Apt. 710</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10173 Date of Disbursement 02 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 430.71</p>

SUBTOTAL of Disbursements This Page (optional)	1828.71
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Leslie Hagar	Transaction ID: 10182 Date of Disbursement 03 / 15 / 2011
	Mailing Address 100 I Street, SE Apt. 710 City Washington State DC Zip Code 20003 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 397.74

B.	Full Name (Last, First, Middle Initial) Leslie Hagar	Transaction ID: 10190 Date of Disbursement 03 / 31 / 2011
	Mailing Address 100 I Street, SE Apt. 710 City Washington State DC Zip Code 20003 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 397.74

C.	Full Name (Last, First, Middle Initial) Leslie Hagar	Transaction ID: 10198 Date of Disbursement 04 / 15 / 2011
	Mailing Address 100 I Street, SE Apt. 710 City Washington State DC Zip Code 20003 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 397.74

SUBTOTAL of Disbursements This Page (optional)	1193.22
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 100 I Street, SE Apt. 710</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10206 Date of Disbursement 04 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 397.75</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 100 I Street, SE Apt. 710</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10229 Date of Disbursement 05 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 397.74</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 100 I Street, SE Apt. 710</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10237 Date of Disbursement 05 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 397.74</p>

SUBTOTAL of Disbursements This Page (optional)	1193.23
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Leslie Hagar	Transaction ID: 114 Date of Disbursement
	Mailing Address 100 I Street, SE Apt. 710	<input type="text" value="02"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Petty Cash	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Leslie Hagar	Transaction ID: 114.1 Date of Disbursement
	Mailing Address 100 I Street, SE Apt. 710	<input type="text" value="02"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimb. travel and parking	<input type="text" value="16.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Leslie Hagar	Transaction ID: 117 Date of Disbursement
	Mailing Address 100 I Street, SE Apt. 710	<input type="text" value="03"/> <input type="text" value="21"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Washington State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement Petty Cash	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="416.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Leslie Hagar	Transaction ID: 5287 Date of Disbursement 02 / 14 / 2011
	Mailing Address 100 I Street, SE Apt. 710	Amount of Each Disbursement this Period 16.97
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Reimb., computer supplies	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10144 Date of Disbursement 01 / 14 / 2011
	Mailing Address 7726 Falstaff Road	Amount of Each Disbursement this Period 6815.35
	City McLean State VA Zip Code 22102	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10155 Date of Disbursement 01 / 31 / 2011
	Mailing Address 7726 Falstaff Road	Amount of Each Disbursement this Period 6180.35
	City McLean State VA Zip Code 22102	
	Purpose of Disbursement Payroll	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

13012.67

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10166 Date of Disbursement 02 / 15 / 2011
	Mailing Address 7726 Falstaff Road	Amount of Each Disbursement this Period 3149.12
	City McLean State VA Zip Code 22102	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10174 Date of Disbursement 02 / 28 / 2011
	Mailing Address 7726 Falstaff Road	Amount of Each Disbursement this Period 2514.11
	City McLean State VA Zip Code 22102	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10183 Date of Disbursement 03 / 15 / 2011
	Mailing Address 7726 Falstaff Road	Amount of Each Disbursement this Period 3149.12
	City McLean State VA Zip Code 22102	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	8812.35
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10191 Date of Disbursement
	Mailing Address 7726 Falstaff Road	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="2514.11"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10199 Date of Disbursement
	Mailing Address 7726 Falstaff Road	<input type="text" value="04"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="3149.12"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10207 Date of Disbursement
	Mailing Address 7726 Falstaff Road	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="2514.11"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8177.34"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10230 Date of Disbursement
	Mailing Address 7726 Falstaff Road	<input type="text" value="05"/> <input type="text" value="13"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="3149.12"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 10238 Date of Disbursement
	Mailing Address 7726 Falstaff Road	<input type="text" value="05"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll	<input type="text" value="2514.11"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 5265 Date of Disbursement
	Mailing Address 7726 Falstaff Road	<input type="text" value="01"/> <input type="text" value="19"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City McLean State VA Zip Code 22102	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimb., parking & mtg. exp.	<input type="text" value="18.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5681.23"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 5364 Date of Disbursement 05 / 10 / 2011
	Mailing Address 7726 Falstaff Road	Amount of Each Disbursement this Period 69.07
	City McLean State VA Zip Code 22102	
	Purpose of Disbursement Reimb., travel	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 5365 Date of Disbursement 05 / 10 / 2011
	Mailing Address 7726 Falstaff Road	Amount of Each Disbursement this Period 41.89
	City McLean State VA Zip Code 22102	
	Purpose of Disbursement Reimb., travel	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Steven Law	Transaction ID: 5408 Date of Disbursement 06 / 13 / 2011
	Mailing Address 7726 Falstaff Road	Amount of Each Disbursement this Period 139.47
	City McLean State VA Zip Code 22102	
	Purpose of Disbursement Reimb., mtg. exp. food & bev.	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	250.43
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 130

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Amy Leedecke</p> <p>Mailing Address 632 Independence Avenue, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10231</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2440.03"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Amy Leedecke</p> <p>Mailing Address 632 Independence Avenue, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10239</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="3"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2440.02"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Chris McInerney</p> <p>Mailing Address 2914 S Buchanan Street</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10145</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3908.90"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

8788.95

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Chris McInerney	Transaction ID: 10156 Date of Disbursement MM / DD / YYYY 01 / 31 / 2011
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3908.90
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chris McInerney	Transaction ID: 10167 Date of Disbursement MM / DD / YYYY 02 / 15 / 2011
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3908.89
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chris McInerney	Transaction ID: 10175 Date of Disbursement MM / DD / YYYY 02 / 28 / 2011
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3908.90
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	11726.69
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
Chris McInerney

Transaction ID: 10184

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	1

Mailing Address 2914 S Buchanan Street

Amount of Each Disbursement this Period

3908.90

City State Zip Code
Arlington VA 22206

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Chris McInerney

Transaction ID: 10192

Date of Disbursement

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

Mailing Address 2914 S Buchanan Street

Amount of Each Disbursement this Period

3908.90

City State Zip Code
Arlington VA 22206

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Chris McInerney

Transaction ID: 10200

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	5		2	0	1	1

Mailing Address 2914 S Buchanan Street

Amount of Each Disbursement this Period

3908.90

City State Zip Code
Arlington VA 22206

Purpose of Disbursement
Payroll

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

11726.70

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

A.	Full Name (Last, First, Middle Initial) Chris McInerney	Transaction ID: 10208 Date of Disbursement 04 / 30 / 2011
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3908.90
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chris McInerney	Transaction ID: 10232 Date of Disbursement 05 / 13 / 2011
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3802.20
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Chris McInerney	Transaction ID: 10240 Date of Disbursement 05 / 31 / 2011
	Mailing Address 2914 S Buchanan Street	Amount of Each Disbursement this Period 3802.21
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Payroll Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	11513.31
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Chris McInerney</p> <p>Mailing Address 2914 S Buchanan Street</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Reimb., mtg. exp., food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5396 Date of Disbursement 06 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 52.83</p>
<p>B. Full Name (Last, First, Middle Initial) Chris McInerney</p> <p>Mailing Address 2914 S Buchanan Street</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Reimb., computer exp.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5396.1 Date of Disbursement 06 / 06 / 2011</p> <p>Amount of Each Disbursement this Period 14.99</p>
<p>C. Full Name (Last, First, Middle Initial) John Milam</p> <p>Mailing Address 2666 Northplace Drive</p> <p>City Tupelo State MS Zip Code 38804</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10233 Date of Disbursement 05 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 564.92</p>

SUBTOTAL of Disbursements This Page (optional)	632.74
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
John Milam

Mailing Address 2666 Northplace Drive

City State Zip Code
Tupelo MS 38804

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 10241
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B.

Full Name (Last, First, Middle Initial)
Brandon Mills

Mailing Address 1047 N Monroe St.

City State Zip Code
Arlington VA 22201

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 10234
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C.

Full Name (Last, First, Middle Initial)
Brandon Mills

Mailing Address 1047 N Monroe St.

City State Zip Code
Arlington VA 22201

Purpose of Disbursement
Payroll

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 10242
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Paul Mouton	Transaction ID: 5350 Date of Disbursement 04 / 25 / 2011
	Mailing Address PO Box 545	Amount of Each Disbursement this Period 5000.00
	City Carthage State MO Zip Code 64836	
	Purpose of Disbursement Consulting, research services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Paul Mouton	Transaction ID: 5384 Date of Disbursement 05 / 26 / 2011
	Mailing Address PO Box 545	Amount of Each Disbursement this Period 5000.00
	City Carthage State MO Zip Code 64836	
	Purpose of Disbursement Consulting, research services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Paul Mouton	Transaction ID: Wire040811 Date of Disbursement 04 / 08 / 2011
	Mailing Address PO Box 545	Amount of Each Disbursement this Period 5000.00
	City Carthage State MO Zip Code 64836	
	Purpose of Disbursement Consulting, research services	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10146 Date of Disbursement 01 / 14 / 2011
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 605.08
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10157 Date of Disbursement 01 / 31 / 2011
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 605.08
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10168 Date of Disbursement 02 / 15 / 2011
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 247.98
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1458.14
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10176 Date of Disbursement 02 / 28 / 2011
	Mailing Address 16 5th Street, SE #201 City Washington State DC Zip Code 20003 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 247.98 Category/Type

B.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10185 Date of Disbursement 03 / 15 / 2011
	Mailing Address 16 5th Street, SE #201 City Washington State DC Zip Code 20003 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 248.20 Category/Type

C.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10193 Date of Disbursement 03 / 31 / 2011
	Mailing Address 16 5th Street, SE #201 City Washington State DC Zip Code 20003 Purpose of Disbursement Payroll Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 248.19 Category/Type

SUBTOTAL of Disbursements This Page (optional)	744.37
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10201 Date of Disbursement 04 / 15 / 2011
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 248.19
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10209 Date of Disbursement 04 / 30 / 2011
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 248.19
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10235 Date of Disbursement 05 / 13 / 2011
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 248.19
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	744.57
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 10243 Date of Disbursement 05 / 31 / 2011
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 248.19
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 5281 Date of Disbursement 02 / 02 / 2011
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 14.99
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Reimb., computer software	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sam Olswanger	Transaction ID: 10147 Date of Disbursement 01 / 14 / 2011
	Mailing Address 1691 Bryn Mawr Court	Amount of Each Disbursement this Period 581.94
	City Germantown State TN Zip Code 22206	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	845.12
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
Tamara Somerville

Mailing Address 406 F Street, NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Voided Check - original date 7/20/2010

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: Void.1
Date of Disbursement

06 / 06 / 2011

Amount of Each Disbursement this Period

-3000.00

Originally reported on the American Crossroads IRS 8872 prior to FEC Registration

B.

Full Name (Last, First, Middle Initial)
ACCION International

Mailing Address 1401 New York Avenue, NW Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Office Rent

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 5283
Date of Disbursement

02 / 14 / 2011

Amount of Each Disbursement this Period

4500.00

C.

Full Name (Last, First, Middle Initial)
ACCION International

Mailing Address 1401 New York Avenue, NW Suite 500

City Washington State DC Zip Code 20005

Purpose of Disbursement
Office Rent

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: 5301
Date of Disbursement

03 / 07 / 2011

Amount of Each Disbursement this Period

4500.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) ACCION International	Transaction ID: 5317 Date of Disbursement 04 / 04 / 2011
	Mailing Address 1401 New York Avenue, NW Suite 500	Amount of Each Disbursement this Period 4500.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ACCION International	Transaction ID: 5380 Date of Disbursement 05 / 26 / 2011
	Mailing Address 1401 New York Avenue, NW Suite 500	Amount of Each Disbursement this Period 4500.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ACCION International	Transaction ID: 5398 Date of Disbursement 06 / 08 / 2011
	Mailing Address 1401 New York Avenue, NW Suite 500	Amount of Each Disbursement this Period 4500.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Office Rent	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	13500.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Adfero Group, LLC	Transaction ID: 5260 Date of Disbursement 01 / 19 / 2011
	Mailing Address 1666 K Street, NW Ste. 250	Amount of Each Disbursement this Period 4000.00
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Printing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Adfero Group, LLC	Transaction ID: 5271 Date of Disbursement 01 / 24 / 2011
	Mailing Address 1666 K Street, NW Ste. 250	Amount of Each Disbursement this Period 4720.00
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Printing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Adfero Group, LLC	Transaction ID: 5302 Date of Disbursement 03 / 07 / 2011
	Mailing Address 1666 K Street, NW Ste. 250	Amount of Each Disbursement this Period 3830.00
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Printing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	12550.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Allied Telecom	Transaction ID: 5395 Date of Disbursement
	Mailing Address 1120 20th Street, NW Ste. 500-S	<input type="text" value="06"/> / <input type="text" value="06"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20036	Amount of Each Disbursement this Period
	Purpose of Disbursement Internet & Telephone	<input type="text" value="1315.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 5272.1 Date of Disbursement
	Mailing Address 1401 New York Avenue, NW Ste. 1200	<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement Office rent & parking	<input type="text" value="2975.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 5272.2 Date of Disbursement
	Mailing Address 1401 New York Avenue, NW Ste. 1200	<input type="text" value="01"/> / <input type="text" value="24"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period
	Purpose of Disbursement BlackBerry Service	<input type="text" value="815.78"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5105.78"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) American Action Network <hr/> Mailing Address 1401 New York Avenue, NW Ste. 1200 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Computer Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5272.3 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 1 1
	Amount of Each Disbursement this Period 700.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) American Action Network <hr/> Mailing Address 1401 New York Avenue, NW Ste. 1200 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Internet Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5272.4 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 1 1
	Amount of Each Disbursement this Period 202.22
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) American Action Network <hr/> Mailing Address 1401 New York Avenue, NW Ste. 1200 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Telephone Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5272.5 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 1 1
	Amount of Each Disbursement this Period 89.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

991.22

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 5272.6 Date of Disbursement 01 / 24 / 2011
	Mailing Address 1401 New York Avenue, NW Ste. 1200	Amount of Each Disbursement this Period 144.81
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Printing & Copying Service	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 5343 Date of Disbursement 04 / 15 / 2011
	Mailing Address 1401 New York Avenue, NW Ste. 1200	Amount of Each Disbursement this Period 7425.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Office Rent	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 5399.1 Date of Disbursement 06 / 08 / 2011
	Mailing Address 1401 New York Avenue, NW Ste. 1200	Amount of Each Disbursement this Period 19323.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Office Rent	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	26892.81
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Equipment & furniture purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5399.2 Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 6500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Computer Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5399.3 Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 2800.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement BlackBerry Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5399.4 Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 4595.50</p>

SUBTOTAL of Disbursements This Page (optional)	13895.50
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)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5399.5</p> <p>Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Telephone & Internet Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5399.6</p> <p>Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 1164.88</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Printing & Copying Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5399.7</p> <p>Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 579.24</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3744.12

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5399.8</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="0"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Arena Communications</p> <p>Mailing Address 1780 W Sequoia Circle</p> <p>City Salt Lake City State UT Zip Code 84104</p> <p>Purpose of Disbursement Postage, Printing/Production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Wire051311.1</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5167.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Arena Communications</p> <p>Mailing Address 1780 W Sequoia Circle</p> <p>City Salt Lake City State UT Zip Code 84104</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Wire051311.2</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="-5167.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="200.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Black Rock Group, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Consulting, advocacy communication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5284 Date of Disbursement 02 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 2064.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Black Rock Group, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Consulting, advocacy communication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5303 Date of Disbursement 03 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 2464.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Black Rock Group, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Consulting, advocacy communication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5323 Date of Disbursement 04 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 2496.00</p>

SUBTOTAL of Disbursements This Page (optional)	7024.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
Black Rock Group, LLC

Transaction ID: 5351
Date of Disbursement

Mailing Address 66 Canal Center Plaza
Ste. 555

05 / 04 / 2011

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement
Consulting, advocacy communication

2464.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Black Rock Group, LLC

Transaction ID: 5407
Date of Disbursement

Mailing Address 66 Canal Center Plaza
Ste. 555

06 / 13 / 2011

City Alexandria State VA Zip Code 22314

Amount of Each Disbursement this Period

Purpose of Disbursement
Consulting, advocacy communication

2432.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Brook Furniture Rental

Transaction ID: 5367
Date of Disbursement

Mailing Address 24997 Network Place

05 / 10 / 2011

City Chicago State IL Zip Code 60673

Amount of Each Disbursement this Period

Purpose of Disbursement
Office Furniture Rental

1269.68

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

6165.68

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Brook Furniture Rental	Transaction ID: 5387 Date of Disbursement
	Mailing Address 24997 Network Place	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2011"/>
	City Chicago State IL Zip Code 60673	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Furniture Rental	<input type="text" value="634.84"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Canvas	Transaction ID: 5352 Date of Disbursement
	Mailing Address PO Box 116922	<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Atlanta State GA Zip Code 30368	Amount of Each Disbursement this Period
	Purpose of Disbursement Equipment Purchase	<input type="text" value="3017.12"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Capitol Computer Experts	Transaction ID: 5304 Date of Disbursement
	Mailing Address 9700-G M. L. King Jr. Highway	<input type="text" value="03"/> / <input type="text" value="07"/> / <input type="text" value="2011"/>
	City Lanham State MD Zip Code 20706	Amount of Each Disbursement this Period
	Purpose of Disbursement Computer Technical Support	<input type="text" value="322.09"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3974.05"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) Capitol Computer Experts Mailing Address 9700-G M. L. King Jr. Highway City Lanham State MD Zip Code 20706 Purpose of Disbursement Computer Technical Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5332 Date of Disbursement 04 / 14 / 2011
	Amount of Each Disbursement this Period 3356.33

B. Full Name (Last, First, Middle Initial) Capitol Computer Experts Mailing Address 9700-G M. L. King Jr. Highway City Lanham State MD Zip Code 20706 Purpose of Disbursement Computer Tech Support & Equipment Purch. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5346 Date of Disbursement 04 / 25 / 2011
	Amount of Each Disbursement this Period 10949.40

C. Full Name (Last, First, Middle Initial) Capitol Computer Experts Mailing Address 9700-G M. L. King Jr. Highway City Lanham State MD Zip Code 20706 Purpose of Disbursement Computer Technical Support Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5353 Date of Disbursement 05 / 04 / 2011
	Amount of Each Disbursement this Period 1079.50

SUBTOTAL of Disbursements This Page (optional) ▶

15385.23

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)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) Capitol Computer Experts Mailing Address 9700-G M. L. King Jr. Highway City Lanham State MD Zip Code 20706 Purpose of Disbursement Computer Technical Support Candidate Name	Transaction ID: 5371 Date of Disbursement 05 / 17 / 2011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

B. Full Name (Last, First, Middle Initial) Capitol Computer Experts Mailing Address 9700-G M. L. King Jr. Highway City Lanham State MD Zip Code 20706 Purpose of Disbursement Computer Technical Support Candidate Name	Transaction ID: 5381 Date of Disbursement 05 / 26 / 2011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

C. Full Name (Last, First, Middle Initial) Capitol Computer Experts Mailing Address 9700-G M. L. King Jr. Highway City Lanham State MD Zip Code 20706 Purpose of Disbursement Computer Tech Support & Equipment Purch. Candidate Name	Transaction ID: 5388 Date of Disbursement 06 / 03 / 2011
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	3559.59
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Capitol Computer Experts <hr/> Mailing Address 9700-G M. L. King Jr. Highway <hr/> City Lanham State MD Zip Code 20706 <hr/> Purpose of Disbursement Computer Tech Support & Equipment Purch. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 5401 Date of Disbursement 06 / 08 / 2011 <hr/> Amount of Each Disbursement this Period 1829.27
B.	Full Name (Last, First, Middle Initial) Carefirst, Blue Cross Blue Shield <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279-749 <hr/> Purpose of Disbursement Health Insurance Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 5285 Date of Disbursement 02 / 14 / 2011 <hr/> Amount of Each Disbursement this Period 2574.00
C.	Full Name (Last, First, Middle Initial) Carefirst, Blue Cross Blue Shield <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279-749 <hr/> Purpose of Disbursement Health Insurance Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 5305 Date of Disbursement 03 / 08 / 2011 <hr/> Amount of Each Disbursement this Period 5148.00

SUBTOTAL of Disbursements This Page (optional) ▶

9551.27

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Carefirst, Blue Cross Blue Shield	Transaction ID: 5331 Date of Disbursement
	Mailing Address PO Box 79749	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City Baltimore State MD Zip Code 21279-749	Amount of Each Disbursement this Period
	Purpose of Disbursement Health Insurance	<input type="text" value="2574.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Carefirst, Blue Cross Blue Shield	Transaction ID: 5359 Date of Disbursement
	Mailing Address PO Box 79749	<input type="text" value="05"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City Baltimore State MD Zip Code 21279-749	Amount of Each Disbursement this Period
	Purpose of Disbursement Health Insurance	<input type="text" value="2574.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Carefirst, Blue Cross Blue Shield	Transaction ID: 5400 Date of Disbursement
	Mailing Address PO Box 79749	<input type="text" value="06"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
	City Baltimore State MD Zip Code 21279-749	Amount of Each Disbursement this Period
	Purpose of Disbursement Health Insurance	<input type="text" value="4442.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9590.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Carr & Hyde Insurance	Transaction ID: 118 Date of Disbursement 05 / 04 / 2011
	Mailing Address PO Box 301	Amount of Each Disbursement this Period 4684.00
	City Warrenton State VA Zip Code 20188	
	Purpose of Disbursement Insurance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) CFL Associates	Transaction ID: 5310 Date of Disbursement 03 / 21 / 2011
	Mailing Address 4189 Four Mile Run Drive #404	Amount of Each Disbursement this Period 2000.00
	City Arlington State VA Zip Code 22204	
	Purpose of Disbursement Consulting, Donor Development	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) CFL Associates	Transaction ID: 5324 Date of Disbursement 04 / 07 / 2011
	Mailing Address 4189 Four Mile Run Drive #404	Amount of Each Disbursement this Period 2000.00
	City Arlington State VA Zip Code 22204	
	Purpose of Disbursement Consulting, Donor Development	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	8684.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
CFL Associates

Transaction ID: 5354
Date of Disbursement

Mailing Address 4189 Four Mile Run Drive #404

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	1

City Arlington State VA Zip Code 22204

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Consulting, Donor Development

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CFL Associates

Transaction ID: 5389
Date of Disbursement

Mailing Address 4189 Four Mile Run Drive #404

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	1

City Arlington State VA Zip Code 22204

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
Consulting, Donor Development

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Clark Schaefer Hackett

Transaction ID: 10148
Date of Disbursement

Mailing Address 160 North Breiel Blvd.

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

City Middleton State OH Zip Code 45042

Amount of Each Disbursement this Period

80.00

Purpose of Disbursement
Payroll Processing

Category/
Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

4080.00

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

A.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 10159 Date of Disbursement 01 / 31 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll Processing Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 10169 Date of Disbursement 02 / 15 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll Processing Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 10177 Date of Disbursement 02 / 28 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll Processing Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 59 / 130

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett Mailing Address 160 North Breiel Blvd. City Middleton State OH Zip Code 45042 Purpose of Disbursement Payroll Processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10186 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 1	Amount of Each Disbursement this Period 80.00
B.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett Mailing Address 160 North Breiel Blvd. City Middleton State OH Zip Code 45042 Purpose of Disbursement Payroll Processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10194 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 1	Amount of Each Disbursement this Period 80.00
C.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett Mailing Address 160 North Breiel Blvd. City Middleton State OH Zip Code 45042 Purpose of Disbursement Payroll Processing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10202 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 1	Amount of Each Disbursement this Period 80.00

SUBTOTAL of Disbursements This Page (optional)	240.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 10210 Date of Disbursement 04 / 30 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll Processing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 10224 Date of Disbursement 05 / 13 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll Processing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 10244 Date of Disbursement 05 / 31 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll Processing	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	240.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 5306 Date of Disbursement 03 / 08 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 150.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll Processing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 5394 Date of Disbursement 06 / 06 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll Processing	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: Void.2 Date of Disbursement 06 / 06 / 2011
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period -80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Voided Check - original date 7/15/2010	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Originally reported on the American Crossroads IRS 8872 prior to FEC Registration

SUBTOTAL of Disbursements This Page (optional)	150.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Connection Strategies</p> <p>Mailing Address PO Box 2192</p> <p>City Arlington State VA Zip Code 22202</p> <p>Purpose of Disbursement Computer Purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5262 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 3506.07</p>
<p>B. Full Name (Last, First, Middle Initial) Department of Employment Services</p> <p>Mailing Address PO Box 9664</p> <p>City Washington State DC Zip Code 20090</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10150 Date of Disbursement 01 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 233.76</p>
<p>C. Full Name (Last, First, Middle Initial) Department of Employment Services</p> <p>Mailing Address PO Box 9664</p> <p>City Washington State DC Zip Code 20090</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10211 Date of Disbursement 04 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 1002.62</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4742.45

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Department of Employment Services	Transaction ID: 5296 Date of Disbursement
	Mailing Address PO Box 9664	<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20090	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="3.51"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) DL&Co.	Transaction ID: 5275 Date of Disbursement
	Mailing Address 2440 N Edgewood St.	<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Arlington State VA Zip Code 22207	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimb., parking	<input type="text" value="162.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) DL&Co.	Transaction ID: 5286 Date of Disbursement
	Mailing Address 2440 N Edgewood St.	<input type="text" value="02"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City Arlington State VA Zip Code 22207	Amount of Each Disbursement this Period
	Purpose of Disbursement Consulting, donor development	<input type="text" value="7500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7665.51"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DL&Co.</p> <p>Mailing Address 2440 N Edgewood St.</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement Consulting, donor development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5297</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2011"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) DL&Co.</p> <p>Mailing Address 2440 N Edgewood St.</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement Reimb., parking</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5347</p> <p>Date of Disbursement</p> <p><input type="text" value="04"/> / <input type="text" value="25"/> / <input type="text" value="2011"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="112.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Dow Jones</p> <p>Mailing Address PO Box 300</p> <p>City Princeton State NJ Zip Code 8543</p> <p>Purpose of Disbursement Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5276</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2011"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="817.81"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Emotive, LLC	Transaction ID: 5277 Date of Disbursement 02 / 02 / 2011
	Mailing Address 2800 Shirlington Road Ste. 901	Amount of Each Disbursement this Period 48.10
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Internet Fundraising	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Emotive, LLC	Transaction ID: 5307 Date of Disbursement 03 / 08 / 2011
	Mailing Address 2800 Shirlington Road Ste. 901	Amount of Each Disbursement this Period 96.69
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Internet Fundraising	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Emotive, LLC	Transaction ID: 5348 Date of Disbursement 04 / 25 / 2011
	Mailing Address 2800 Shirlington Road Ste. 901	Amount of Each Disbursement this Period 875.00
	City Arlington State VA Zip Code 22206	
	Purpose of Disbursement Internet Fundraising	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1019.79
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

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

Transaction ID: 5360
Date of Disbursement

Mailing Address 2800 Shirlington Road
Ste. 901

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

City Arlington State VA Zip Code 22206

Amount of Each Disbursement this Period

49.10

Purpose of Disbursement
Internet Fundraising

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
FedEx

Transaction ID: 5263
Date of Disbursement

Mailing Address 942 S Shady Grove Road

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

City Memphis State TN Zip Code 38120

Amount of Each Disbursement this Period

1410.29

Purpose of Disbursement
Shipping

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Financial Agent

Transaction ID: 10149
Date of Disbursement

Mailing Address PO Box 970030

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

City St. Louis State MO Zip Code 63197

Amount of Each Disbursement this Period

5907.55

Purpose of Disbursement
Payroll Taxes

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

7366.94

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

<p>A. Full Name (Last, First, Middle Initial) Financial Agent</p> <p>Mailing Address PO Box 970030</p> <p>City St. Louis State MO Zip Code 63197</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10160 Date of Disbursement 01 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 6125.94</p>
<p>B. Full Name (Last, First, Middle Initial) Financial Agent</p> <p>Mailing Address PO Box 970030</p> <p>City St. Louis State MO Zip Code 63197</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10170 Date of Disbursement 02 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 2712.43</p>
<p>C. Full Name (Last, First, Middle Initial) Financial Agent</p> <p>Mailing Address PO Box 970030</p> <p>City St. Louis State MO Zip Code 63197</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10178 Date of Disbursement 02 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 2712.42</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11550.79

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) Financial Agent Mailing Address PO Box 970030 City St. Louis State MO Zip Code 63197 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10187 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 5 / 2 0 1 1
	Amount of Each Disbursement this Period 2744.91

B. Full Name (Last, First, Middle Initial) Financial Agent Mailing Address PO Box 970030 City St. Louis State MO Zip Code 63197 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10195 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 1 1
	Amount of Each Disbursement this Period 2409.31

C. Full Name (Last, First, Middle Initial) Financial Agent Mailing Address PO Box 970030 City St. Louis State MO Zip Code 63197 Purpose of Disbursement Payroll Taxes Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 10203 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 5 / 2 0 1 1
	Amount of Each Disbursement this Period 2744.92

SUBTOTAL of Disbursements This Page (optional) ▶	7899.14
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Financial Agent	Full Name (Last, First, Middle Initial)	Transaction ID: 10212	
	Mailing Address PO Box 970030	Date of Disbursement 04 / 30 / 2011	
	City St. Louis State MO Zip Code 63197	Amount of Each Disbursement this Period 2744.92	
	Purpose of Disbursement Payroll Taxes	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B. Financial Agent	Full Name (Last, First, Middle Initial)	Transaction ID: 10225	
	Mailing Address PO Box 970030	Date of Disbursement 05 / 13 / 2011	
	City St. Louis State MO Zip Code 63197	Amount of Each Disbursement this Period 4243.71	
	Purpose of Disbursement Payroll Taxes	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C. Financial Agent	Full Name (Last, First, Middle Initial)	Transaction ID: 10245	
	Mailing Address PO Box 970030	Date of Disbursement 05 / 31 / 2011	
	City St. Louis State MO Zip Code 63197	Amount of Each Disbursement this Period 4797.54	
	Purpose of Disbursement Payroll Taxes	Category/ Type	
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	11786.17
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7300 Hudson Blvd. Ste. 270</p> <p>City St. Paul State MN Zip Code 55128</p> <p>Purpose of Disbursement Conference Call Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5264</p> <p>Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 212.30</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7300 Hudson Blvd. Ste. 270</p> <p>City St. Paul State MN Zip Code 55128</p> <p>Purpose of Disbursement Conference Call Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5278</p> <p>Date of Disbursement 02 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 180.19</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7300 Hudson Blvd. Ste. 270</p> <p>City St. Paul State MN Zip Code 55128</p> <p>Purpose of Disbursement Conference Call Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5300</p> <p>Date of Disbursement 03 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 372.50</p>

SUBTOTAL of Disbursements This Page (optional) ▶

764.99

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 5320 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste. 270	<input type="text" value="04"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Conference Call Services	<input type="text" value="340.38"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 5355 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste. 270	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Conference Call Services	<input type="text" value="398.41"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FLS Connect	Transaction ID: 5390 Date of Disbursement
	Mailing Address 7300 Hudson Blvd. Ste. 270	<input type="text" value="06"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City State Zip Code St. Paul MN 55128	Amount of Each Disbursement this Period
	Purpose of Disbursement Conference Call Services	<input type="text" value="311.89"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1050.68"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Frank Parsons, Inc.</p> <p>Mailing Address PO Box 759070</p> <p>City Baltimore State MD Zip Code 21275</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5349</p> <p>Date of Disbursement 04 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 157.48</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Frank Parsons, Inc.</p> <p>Mailing Address PO Box 759070</p> <p>City Baltimore State MD Zip Code 21275</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5377</p> <p>Date of Disbursement 05 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 453.86</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Frank Parsons, Inc.</p> <p>Mailing Address PO Box 759070</p> <p>City Baltimore State MD Zip Code 21275</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5383</p> <p>Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 175.95</p>

SUBTOTAL of Disbursements This Page (optional)	787.29
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Frank Parsons, Inc.</p> <p>Mailing Address PO Box 759070</p> <p>City Baltimore State MD Zip Code 21275</p> <p>Purpose of Disbursement Equipment Purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5383a Date of Disbursement 05 / 26 / 2011</p> <p>Amount of Each Disbursement this Period 557.99</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Frank Parsons, Inc.</p> <p>Mailing Address PO Box 759070</p> <p>City Baltimore State MD Zip Code 21275</p> <p>Purpose of Disbursement Equipment Purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5391 Date of Disbursement 06 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 141.47</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Frank Parsons, Inc.</p> <p>Mailing Address PO Box 759070</p> <p>City Baltimore State MD Zip Code 21275</p> <p>Purpose of Disbursement Office Supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5402 Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 35.99</p>

SUBTOTAL of Disbursements This Page (optional)	735.45
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) HoltzmanVogel, PLLC Mailing Address 45 North Hill Drive Ste. 100 City Warrenton State VA Zip Code 20186 Purpose of Disbursement Legal fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5280 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 1	Amount of Each Disbursement this Period 20780.35
B.	Full Name (Last, First, Middle Initial) HoltzmanVogel, PLLC Mailing Address 45 North Hill Drive Ste. 100 City Warrenton State VA Zip Code 20186 Purpose of Disbursement Legal fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5311 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 1 1	Amount of Each Disbursement this Period 4168.75
C.	Full Name (Last, First, Middle Initial) HoltzmanVogel, PLLC Mailing Address 45 North Hill Drive Ste. 100 City Warrenton State VA Zip Code 20186 Purpose of Disbursement Legal fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5325 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1	Amount of Each Disbursement this Period 9106.78

SUBTOTAL of Disbursements This Page (optional) ▶

34055.88

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) HoltzmanVogel, PLLC</p> <p>Mailing Address 45 North Hill Drive Ste. 100</p> <p>City Warrenton State VA Zip Code 20186</p> <p>Purpose of Disbursement Legal fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5373 Date of Disbursement 05 / 17 / 2011</p> <p>Amount of Each Disbursement this Period 21156.28</p>
<p>B. Full Name (Last, First, Middle Initial) Kintera Blackbud</p> <p>Mailing Address 2000 Daniel Island Drive</p> <p>City Charleston State SC Zip Code 29492</p> <p>Purpose of Disbursement Website contribution processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Web013111 Date of Disbursement 01 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 14.32</p>
<p>C. Full Name (Last, First, Middle Initial) Kintera Blackbud</p> <p>Mailing Address 2000 Daniel Island Drive</p> <p>City Charleston State SC Zip Code 29492</p> <p>Purpose of Disbursement Website contribution processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Web022811 Date of Disbursement 02 / 28 / 2011</p> <p>Amount of Each Disbursement this Period 6.92</p>

SUBTOTAL of Disbursements This Page (optional) ▶

21177.52

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Kintera Blackbud	Transaction ID: Web033111 Date of Disbursement 03 / 31 / 2011
	Mailing Address 2000 Daniel Island Drive	Amount of Each Disbursement this Period 617.73
	City Charleston State SC Zip Code 29492	
	Purpose of Disbursement Website contribution processing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Kintera Blackbud	Transaction ID: Web043011 Date of Disbursement 04 / 30 / 2011
	Mailing Address 2000 Daniel Island Drive	Amount of Each Disbursement this Period 90.81
	City Charleston State SC Zip Code 29492	
	Purpose of Disbursement Website contribution processing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Kintera Blackbud	Transaction ID: Web053111 Date of Disbursement 05 / 31 / 2011
	Mailing Address 2000 Daniel Island Drive	Amount of Each Disbursement this Period 1585.07
	City Charleston State SC Zip Code 29492	
	Purpose of Disbursement Website contribution processing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	2293.61
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Kintera Blackbud	Transaction ID: Web061311 Date of Disbursement 06 / 13 / 2011
	Mailing Address 2000 Daniel Island Drive	Amount of Each Disbursement this Period 5.36
	City Charleston State SC Zip Code 29492	
	Purpose of Disbursement Website contribution processing	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Lexis Nexis	Transaction ID: 5273 Date of Disbursement 01 / 24 / 2011
	Mailing Address PO Box 7247-7090	Amount of Each Disbursement this Period 954.00
	City Philadelphia State PA Zip Code 19170-7090	
	Purpose of Disbursement Subscriptions	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lexis Nexis	Transaction ID: 5293 Date of Disbursement 02 / 22 / 2011
	Mailing Address PO Box 7247-7090	Amount of Each Disbursement this Period 1049.40
	City Philadelphia State PA Zip Code 19170-7090	
	Purpose of Disbursement Subscriptions	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2008.76
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Lexis Nexis	Transaction ID: 5312 Date of Disbursement
	Mailing Address PO Box 7247-7090	<input type="text" value="03"/> / <input type="text" value="21"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19170-7090	Amount of Each Disbursement this Period
	Purpose of Disbursement Subscriptions	<input type="text" value="1049.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Lexis Nexis	Transaction ID: 5333 Date of Disbursement
	Mailing Address PO Box 7247-7090	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19170-7090	Amount of Each Disbursement this Period
	Purpose of Disbursement Subscriptions	<input type="text" value="1049.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Lexis Nexis	Transaction ID: 5361 Date of Disbursement
	Mailing Address PO Box 7247-7090	<input type="text" value="05"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19170-7090	Amount of Each Disbursement this Period
	Purpose of Disbursement Subscriptions	<input type="text" value="1049.40"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3148.20"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
Lexis Nexis

Mailing Address PO Box 7247-7090

City Philadelphia State PA Zip Code 19170-7090

Purpose of Disbursement
Subscriptions
Candidate Name

Category/
Type

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

Transaction ID: 5409
Date of Disbursement

06 / 13 / 2011

Amount of Each Disbursement this Period

1049.40

B.

Full Name (Last, First, Middle Initial)
Lockton

Mailing Address PO Box 415831

City Boston State MA Zip Code 2241

Purpose of Disbursement
Insurance
Candidate Name

Category/
Type

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

Transaction ID: 5392
Date of Disbursement

06 / 03 / 2011

Amount of Each Disbursement this Period

11713.00

C.

Full Name (Last, First, Middle Initial)
MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement
Bookkeeping and Compliance
Candidate Name

Category/
Type

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

Transaction ID: 5274
Date of Disbursement

01 / 24 / 2011

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ▶

15762.40

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) MAXimum Compliance, LLC <hr/> Mailing Address 4703 Woodway Lane, NW <hr/> City Washington State DC Zip Code 20016 <hr/> Purpose of Disbursement Bookkeeping and Compliance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5288 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 1 1
	Amount of Each Disbursement this Period 3106.79
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) MAXimum Compliance, LLC <hr/> Mailing Address 4703 Woodway Lane, NW <hr/> City Washington State DC Zip Code 20016 <hr/> Purpose of Disbursement Bookkeeping and Compliance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5313 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 1 / 2 0 1 1
	Amount of Each Disbursement this Period 3096.50
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) MAXimum Compliance, LLC <hr/> Mailing Address 4703 Woodway Lane, NW <hr/> City Washington State DC Zip Code 20016 <hr/> Purpose of Disbursement Bookkeeping and Compliance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5326 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 1
	Amount of Each Disbursement this Period 3000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

9203.29

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) MAXimum Compliance, LLC	Transaction ID: 5329 Date of Disbursement 04 / 07 / 2011
	Mailing Address 4703 Woodway Lane, NW	Amount of Each Disbursement this Period 107.86
	City Washington State DC Zip Code 20016	
	Purpose of Disbursement Bookkeeping and Compliance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MAXimum Compliance, LLC	Transaction ID: 5362 Date of Disbursement 05 / 10 / 2011
	Mailing Address 4703 Woodway Lane, NW	Amount of Each Disbursement this Period 3111.50
	City Washington State DC Zip Code 20016	
	Purpose of Disbursement Bookkeeping and Compliance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MAXimum Compliance, LLC	Transaction ID: 5414 Date of Disbursement 06 / 13 / 2011
	Mailing Address 4703 Woodway Lane, NW	Amount of Each Disbursement this Period 4270.50
	City Washington State DC Zip Code 20016	
	Purpose of Disbursement Bookkeeping and Compliance	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7489.86
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) McKenna & Associates	Transaction ID: 5289 Date of Disbursement 02 / 14 / 2011
	Mailing Address 2321 North Kentucky St.	Amount of Each Disbursement this Period 12500.00
	City Arlington State VA Zip Code 22205	
	Purpose of Disbursement Consulting, donor development	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) McKenna & Associates	Transaction ID: 5298 Date of Disbursement 03 / 01 / 2011
	Mailing Address 2321 North Kentucky St.	Amount of Each Disbursement this Period 5000.00
	City Arlington State VA Zip Code 22205	
	Purpose of Disbursement Consulting, donor development	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) McKenna & Associates	Transaction ID: 5334 Date of Disbursement 04 / 14 / 2011
	Mailing Address 2321 North Kentucky St.	Amount of Each Disbursement this Period 5000.00
	City Arlington State VA Zip Code 22205	
	Purpose of Disbursement Consulting, donor development	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	22500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

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

Transaction ID: 5356
Date of Disbursement

Mailing Address 2321 North Kentucky St.

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	1

City Arlington State VA Zip Code 22205

Amount of Each Disbursement this Period

Purpose of Disbursement
Consulting, donor development

5000.00

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

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

Transaction ID: 5403
Date of Disbursement

Mailing Address 2321 North Kentucky St.

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	1

City Arlington State VA Zip Code 22205

Amount of Each Disbursement this Period

Purpose of Disbursement
Consulting, donor development

5000.00

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
MDC & Associates, Inc.

Transaction ID: 5290
Date of Disbursement

Mailing Address 1701 Esquire Lane

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

City McLean State VA Zip Code 22101

Amount of Each Disbursement this Period

Purpose of Disbursement
Bookkeeping & Compliance

3250.00

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

13250.00

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

A.	Full Name (Last, First, Middle Initial) MDC & Associates, Inc.	Transaction ID: 5295 Date of Disbursement 02 / 27 / 2011
	Mailing Address 1701 Esquire Lane	Amount of Each Disbursement this Period 3268.00
	City McLean State VA Zip Code 22101	
	Purpose of Disbursement Bookkeeping & Compliance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MDC & Associates, Inc.	Transaction ID: 5322 Date of Disbursement 04 / 04 / 2011
	Mailing Address 1701 Esquire Lane	Amount of Each Disbursement this Period 3250.00
	City McLean State VA Zip Code 22101	
	Purpose of Disbursement Bookkeeping & Compliance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MDC & Associates, Inc.	Transaction ID: 5357 Date of Disbursement 05 / 04 / 2011
	Mailing Address 1701 Esquire Lane	Amount of Each Disbursement this Period 3250.00
	City McLean State VA Zip Code 22101	
	Purpose of Disbursement Bookkeeping & Compliance Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	9768.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) MDC & Associates, Inc. <hr/> Mailing Address 1701 Esquire Lane <hr/> City McLean State VA Zip Code 22101 <hr/> Purpose of Disbursement Bookkeeping & Compliance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5410 Date of Disbursement M M / D D / Y Y Y Y 06 / 13 / 2011
	Amount of Each Disbursement this Period 3301.44

B. Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc. <hr/> Mailing Address 600 Fairmont Avenue Ste. 306 <hr/> City Towson State MD Zip Code 21286 <hr/> Purpose of Disbursement Deposit, Media Placement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Wire050911.1 Date of Disbursement M M / D D / Y Y Y Y 05 / 09 / 2011
	Amount of Each Disbursement this Period 301484.00

C. Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc. <hr/> Mailing Address 600 Fairmont Avenue Ste. 306 <hr/> City Towson State MD Zip Code 21286 <hr/> Purpose of Disbursement See Schedule E Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Wire050911.2 Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2011
	Amount of Each Disbursement this Period -301484.00

SUBTOTAL of Disbursements This Page (optional) ▶	3301.44
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.	Transaction ID: Wire051311.01 Date of Disbursement 05 / 13 / 2011
	Mailing Address 600 Fairmont Avenue Ste. 306	Amount of Each Disbursement this Period 301484.00
	City Towson State MD Zip Code 21286	
	Purpose of Disbursement Deposit, Media Placement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.	Transaction ID: Wire051311.02 Date of Disbursement 05 / 17 / 2011
	Mailing Address 600 Fairmont Avenue Ste. 306	Amount of Each Disbursement this Period -301484.00
	City Towson State MD Zip Code 21286	
	Purpose of Disbursement See Schedule E Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Merchant Payment Services	Transaction ID: ACH021411 Date of Disbursement 02 / 14 / 2011
	Mailing Address 7300 Chapman Highway	Amount of Each Disbursement this Period 75.00
	City Knoxville State TN Zip Code 37920	
	Purpose of Disbursement Credit Card Processing Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	75.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: ACH030811 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 1 1
	Amount of Each Disbursement this Period 75.00 Category/Type

B. Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: ACH040411 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 1 1
	Amount of Each Disbursement this Period 75.00 Category/Type

C. Full Name (Last, First, Middle Initial) 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: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: ACH050211 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 1 1
	Amount of Each Disbursement this Period 75.00 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	225.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Merchant Payment Services</p> <p>Mailing Address 7300 Chapman Highway</p> <p>City Knoxville State TN Zip Code 37920</p> <p>Purpose of Disbursement Credit Card Processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: ACH060211</p> <p>Date of Disbursement 06 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 80.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) National Journal Group</p> <p>Mailing Address 600 New Hampshire Avenue, NW</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5378</p> <p>Date of Disbursement 05 / 18 / 2011</p> <p>Amount of Each Disbursement this Period 9326.94</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Office of Tax and Revenue</p> <p>Mailing Address PO Box 96385</p> <p>City Washington State DC Zip Code 20090</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10163</p> <p>Date of Disbursement 01 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 251.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9657.94

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Office of Tax and Revenue	Transaction ID: 10179 Date of Disbursement
	Mailing Address PO Box 96385	<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20090	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="24.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Office of Tax and Revenue	Transaction ID: 10248 Date of Disbursement
	Mailing Address PO Box 96385	<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20090	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1272.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Old Dominion Research Group	Transaction ID: 5368 Date of Disbursement
	Mailing Address PO Box 151444	<input type="text" value="05"/> / <input type="text" value="10"/> / <input type="text" value="2011"/>
	City Alexandria State VA Zip Code 22315	Amount of Each Disbursement this Period
	Purpose of Disbursement Research Services	<input type="text" value="11000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12296.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 90 / 130

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Pars International Corp.</p> <p>Mailing Address 253 W 35th Street 7th Floor</p> <p>City New York State NY Zip Code 10001</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5294 Date of Disbursement 02 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 7401.93</p>
<p>B. Full Name (Last, First, Middle Initial) Public Opinion Strategies</p> <p>Mailing Address 214 North Fayette St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Survey & Polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5393 Date of Disbursement 06 / 03 / 2011</p> <p>Amount of Each Disbursement this Period 12000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Reprint Outsource</p> <p>Mailing Address 1525 Oregon Pike Ste. 1202</p> <p>City Lancaster State PA Zip Code 17601</p> <p>Purpose of Disbursement Printing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5314 Date of Disbursement 03 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 1150.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

20551.93

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Richard Sales Media</p> <p>Mailing Address 9010 S 10th Street</p> <p>City Phoenix State AZ Zip Code 85042</p> <p>Purpose of Disbursement Web Production Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5404</p> <p>Date of Disbursement 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rock Creek Advisors LLC</p> <p>Mailing Address PO Box 4963</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Consulting, donor development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5291</p> <p>Date of Disbursement 02 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 7500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rock Creek Advisors LLC</p> <p>Mailing Address PO Box 4963</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Consulting, donor development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5315</p> <p>Date of Disbursement 03 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 3000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rock Creek Advisors LLC</p> <p>Mailing Address PO Box 4963</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Consulting, donor development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5328</p> <p>Date of Disbursement MM / DD / YYYY 04 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 3000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rock Creek Advisors LLC</p> <p>Mailing Address PO Box 4963</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Consulting, donor development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5363</p> <p>Date of Disbursement MM / DD / YYYY 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 3000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Rock Creek Advisors LLC</p> <p>Mailing Address PO Box 4963</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Consulting, donor development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5405</p> <p>Date of Disbursement MM / DD / YYYY 06 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 3179.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

9179.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) System Parking	Transaction ID: 5385 Date of Disbursement
	Mailing Address 2300 M Street, NW #900	<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20037	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Parking	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) System Parking	Transaction ID: 5386 Date of Disbursement
	Mailing Address 2300 M Street, NW #900	<input type="text" value="05"/> / <input type="text" value="26"/> / <input type="text" value="2011"/>
	City Washington State DC Zip Code 20037	Amount of Each Disbursement this Period
	Purpose of Disbursement Office Parking	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Targeted Victory	Transaction ID: 5375 Date of Disbursement
	Mailing Address 66 Canal Center Plaza Ste. 501	<input type="text" value="05"/> / <input type="text" value="17"/> / <input type="text" value="2011"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Website development	<input type="text" value="1700.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2700.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Targeted Victory	Full Name (Last, First, Middle Initial)	Transaction ID: 5379
	Mailing Address 66 Canal Center Plaza Ste. 501	Date of Disbursement 05 / 18 / 2011
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 6166.60
	Purpose of Disbursement Website hosting & development	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B. Targeted Victory	Full Name (Last, First, Middle Initial)	Transaction ID: 5406
	Mailing Address 66 Canal Center Plaza Ste. 501	Date of Disbursement 06 / 08 / 2011
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 6000.00
	Purpose of Disbursement Website hosting & development	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C. Targeted Victory	Full Name (Last, First, Middle Initial)	Transaction ID: 5411
	Mailing Address 66 Canal Center Plaza Ste. 501	Date of Disbursement 06 / 13 / 2011
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 5300.00
	Purpose of Disbursement Website development	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	17466.60
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Targeted Victory</p> <p>Mailing Address 66 Canal Center Plaza Ste. 501</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement On-Line Advertising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Wire050911.090 Date of Disbursement 05 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 50000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Targeted Victory</p> <p>Mailing Address 66 Canal Center Plaza Ste. 501</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Wire051411.091 Date of Disbursement 05 / 14 / 2011</p> <p>Amount of Each Disbursement this Period -50000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Tray</p> <p>Mailing Address PO Box 1360</p> <p>City Glen Burnie State MD Zip Code 21061</p> <p>Purpose of Disbursement Printing, letterhead and business cards</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5266 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 3928.14</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3928.14

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Tray	Transaction ID: 5299 Date of Disbursement 03 / 01 / 2011
	Mailing Address PO Box 1360	Amount of Each Disbursement this Period 750.48
	City Glen Burnie State MD Zip Code 21061	
	Purpose of Disbursement Printing, letterhead and business cards	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Tray	Transaction ID: 5335 Date of Disbursement 04 / 14 / 2011
	Mailing Address PO Box 1360	Amount of Each Disbursement this Period 255.12
	City Glen Burnie State MD Zip Code 21061	
	Purpose of Disbursement Printing, letterhead and business cards	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) US Treasury	Transaction ID: 10151 Date of Disbursement 01 / 14 / 2011
	Mailing Address PO Box 804521	Amount of Each Disbursement this Period 336.00
	City Cincinnati State OH Zip Code 45280	
	Purpose of Disbursement Payroll Taxes	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1341.60
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 10152 Date of Disbursement
	Mailing Address PO Box 27264	<input type="text" value="01"/> / <input type="text" value="14"/> / <input type="text" value="2011"/>
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1026.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 10162 Date of Disbursement
	Mailing Address PO Box 27264	<input type="text" value="01"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="1026.55"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 10171 Date of Disbursement
	Mailing Address PO Box 27264	<input type="text" value="02"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="547.87"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2600.97"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 10180 Date of Disbursement
	Mailing Address PO Box 27264	<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2011"/>
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="547.87"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 10188 Date of Disbursement
	Mailing Address PO Box 27264	<input type="text" value="03"/> / <input type="text" value="15"/> / <input type="text" value="2011"/>
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="547.87"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 10196 Date of Disbursement
	Mailing Address PO Box 27264	<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
	City Richmond State VA Zip Code 23261	Amount of Each Disbursement this Period
	Purpose of Disbursement Payroll Taxes	<input type="text" value="547.87"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1643.61"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Virginia Department of Taxation</p> <p>Mailing Address PO Box 27264</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10204</p> <p>Date of Disbursement 04 / 15 / 2011</p> <p>Amount of Each Disbursement this Period 547.87</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Virginia Department of Taxation</p> <p>Mailing Address PO Box 27264</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10213</p> <p>Date of Disbursement 04 / 30 / 2011</p> <p>Amount of Each Disbursement this Period 547.87</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Virginia Department of Taxation</p> <p>Mailing Address PO Box 27264</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10227</p> <p>Date of Disbursement 05 / 13 / 2011</p> <p>Amount of Each Disbursement this Period 288.94</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1384.68

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)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Virginia Department of Taxation</p> <p>Mailing Address PO Box 27264</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 10247 Date of Disbursement 05 / 31 / 2011</p> <p>Amount of Each Disbursement this Period 350.22</p>
<p>B. Full Name (Last, First, Middle Initial) Virginia Department of Taxation</p> <p>Mailing Address PO Box 27264</p> <p>City Richmond State VA Zip Code 23261</p> <p>Purpose of Disbursement Payroll Taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5292 Date of Disbursement 02 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 62.15</p>
<p>C. Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 4513</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Credit Card Payment-See Memo Entries</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21CCP.1 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 11.94</p>

SUBTOTAL of Disbursements This Page (optional)	424.31
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)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 4513</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.1 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 11.94</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 4513</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Credit Card Payment-See Memo Entries</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21CCP.10 Date of Disbursement 04 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 514.00</p>
<p>C. Full Name (Last, First, Middle Initial) Access Intelligence, LLC</p> <p>Mailing Address 4 Choke Cherry Road 2nd Floor</p> <p>City Rockville State MD Zip Code 20850</p> <p>Purpose of Disbursement Computer Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.82 Date of Disbursement 04 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 414.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

514.00

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SC21CCD.83 Date of Disbursement 04 / 14 / 2011
	Mailing Address PO Box 6416	Amount of Each Disbursement this Period 100.00
	City Carol Stream State IL Zip Code 60197	
	Purpose of Disbursement Internet Service	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21CCP.11 Date of Disbursement 05 / 10 / 2011
	Mailing Address PO Box 4513	Amount of Each Disbursement this Period 166.72
	City Carol Stream State IL Zip Code 60197	
	Purpose of Disbursement Credit Card Payment-See Memo Entries	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) AT&T	Transaction ID: SC21CCD.89 Date of Disbursement 05 / 10 / 2011
	Mailing Address PO Box 6416	Amount of Each Disbursement this Period 100.00
	City Carol Stream State IL Zip Code 60197	
	Purpose of Disbursement Internet Service	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	166.72
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)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 4513</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Credit Card Payment-See Memo Entries</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21CCP.12 Date of Disbursement: 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 3951.22</p>
<p>B. Full Name (Last, First, Middle Initial) AT&T</p> <p>Mailing Address PO Box 6416</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Internet Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.116 Date of Disbursement: 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 25.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) CMDI</p> <p>Mailing Address 7704 Leesburg Pike</p> <p>City Falls Church State VA Zip Code 22043</p> <p>Purpose of Disbursement Database Management</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.101 Date of Disbursement: 05 / 10 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	3951.22
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) Equinox Mailing Address 818 Connecticut Avenue, NW City Washington State DC Zip Code 20006 Purpose of Disbursement Mtg. exp., food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.104 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1
	Amount of Each Disbursement this Period 364.70 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) FedEx Mailing Address 942 S Shady Grove Road City Memphis State TN Zip Code 38120 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.113 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1
	Amount of Each Disbursement this Period 85.21 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Frontier Airlines Mailing Address 701 Tower Road City Denver State CO Zip Code 80249 Purpose of Disbursement Airfare Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.110 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 1 1
	Amount of Each Disbursement this Period 677.10 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Godaddy.com	Transaction ID: SC21CCD.100 Date of Disbursement 05 / 10 / 2011
	Mailing Address 14455 N Hayden Road	Amount of Each Disbursement this Period 96.66
	City Scottsdale State AZ Zip Code 85260	
	Purpose of Disbursement Internet Expense	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) Hay Adams	Transaction ID: SC21CCD.107 Date of Disbursement 05 / 10 / 2011
	Mailing Address 800 16th St., NW	Amount of Each Disbursement this Period 59.78
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Mtg. exp., food & bev.	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) Hill Country BBQ	Transaction ID: SC21CCD.109 Date of Disbursement 05 / 10 / 2011
	Mailing Address 410 Seventh Street, NW	Amount of Each Disbursement this Period 455.40
	City Washington State DC Zip Code 20004	
	Purpose of Disbursement Mtg. exp., food & bev.	[MEMO ITEM]
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) United Airlines	Transaction ID: SC21CCD.106 Date of Disbursement 05 / 10 / 2011
	Mailing Address PO Box 66100	Amount of Each Disbursement this Period 1328.80
	City Chicago State IL Zip Code 60666	
	Purpose of Disbursement Airfare	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Washington Courier	Transaction ID: SC21CCD.102 Date of Disbursement 05 / 10 / 2011
	Mailing Address 5520 Cherokee Avenue	Amount of Each Disbursement this Period 191.08
	City Alexandria State VA Zip Code 22312	
	Purpose of Disbursement Courier Service	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Westin - St. Francis	Transaction ID: SC21CCD.97 Date of Disbursement 05 / 10 / 2011
	Mailing Address 335 Powell St.	Amount of Each Disbursement this Period 3.99
	City San Francisco State CA Zip Code 94102	
	Purpose of Disbursement Mtg. exp., food & bev.	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21CCP.2 Date of Disbursement
	Mailing Address PO Box 4513	<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment-See Memo Entries	<input type="text" value="74.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SC21CCD.118 Date of Disbursement
	Mailing Address PO Box 4513	<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Fees	<input type="text" value="44.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21CCP.3 Date of Disbursement
	Mailing Address PO Box 4513	<input type="text" value="01"/> / <input type="text" value="19"/> / <input type="text" value="2011"/>
	City Carol Stream State IL Zip Code 60197	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit Card Payment-See Memo Entries	<input type="text" value="4253.22"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4327.22"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Adobe Systems, Inc.</p> <p>Mailing Address 345 Park Avenue</p> <p>City San Jose State CA Zip Code 95110</p> <p>Purpose of Disbursement Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.15</p> <p>Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 1570.69</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) CMDI</p> <p>Mailing Address 7704 Leesburg Pike</p> <p>City Falls Church State VA Zip Code 22043</p> <p>Purpose of Disbursement Database Management</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.6</p> <p>Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Custom Scoop</p> <p>Mailing Address 130 Pembroke Road Ste. 150</p> <p>City Concord State NH Zip Code 3301</p> <p>Purpose of Disbursement Press Clippings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.4</p> <p>Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 499.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
FedEx

Mailing Address 942 S Shady Grove Road

City Memphis State TN Zip Code 38120

Purpose of Disbursement
Shipping

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SC21CCD.7
Date of Disbursement

01 / 19 / 2011

Amount of Each Disbursement this Period

28.83

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Hay Adams

Mailing Address 800 16th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Mtg. exp., food & bev.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SC21CCD.2
Date of Disbursement

01 / 19 / 2011

Amount of Each Disbursement this Period

232.18

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)
Seamless Web

Mailing Address 232 Madison Avenue

City New York State NY Zip Code 10016

Purpose of Disbursement
Mtg. exp., food & bev.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SC21CCD.10
Date of Disbursement

01 / 19 / 2011

Amount of Each Disbursement this Period

237.90

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Sofitel Hotel - DC</p> <p>Mailing Address 806 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Mtg. exp., food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.11 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 35.35</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Trattoria Alberto</p> <p>Mailing Address 506 8th Street, SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Mtg. exp., food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.8 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 494.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) USPS</p> <p>Mailing Address 475 L'Enfant Plaza, SW</p> <p>City Washington State DC Zip Code 20260</p> <p>Purpose of Disbursement Postage, gen. admin. usage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.12 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 491.00</p> <p>[MEMO ITEM]</p>

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Washington Courier</p> <p>Mailing Address 5520 Cherokee Avenue</p> <p>City Alexandria State VA Zip Code 22312</p> <p>Purpose of Disbursement Courier Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.13 Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 49.62</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 4513</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Credit Card Payment-See Memo Entries</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21CCP.4 Date of Disbursement 02 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 862.47</p>
<p>C. Full Name (Last, First, Middle Initial) Amazon.com</p> <p>Mailing Address 1516 2nd Avenue</p> <p>City Seattle State WA Zip Code 98101</p> <p>Purpose of Disbursement Furniture Purchase</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.17 Date of Disbursement 02 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 760.35</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

862.47

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
AT&T

Transaction ID: SC21CCD.18
Date of Disbursement

Mailing Address PO Box 6416

/ /

City State Zip Code
Carol Stream IL 60197

Amount of Each Disbursement this Period

Purpose of Disbursement
Internet Service

Category/
Type

Candidate Name

[MEMO ITEM]

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Visa

Transaction ID: SC21CCD.16
Date of Disbursement

Mailing Address PO Box 4513

/ /

City State Zip Code
Carol Stream IL 60197

Amount of Each Disbursement this Period

Purpose of Disbursement
Fees

Category/
Type

Candidate Name

[MEMO ITEM]

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Visa

Transaction ID: SB21CCP.5
Date of Disbursement

Mailing Address PO Box 4513

/ /

City State Zip Code
Carol Stream IL 60197

Amount of Each Disbursement this Period

Purpose of Disbursement
Credit Card Payment-See Memo Entries

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 6416 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.28 Date of Disbursement 02 / 09 / 2011
	Category/Type Amount of Each Disbursement this Period 25.00 [MEMO ITEM]	

B. Full Name (Last, First, Middle Initial) Carmine's Mailing Address 425 7th Street, NW City Washington State DC Zip Code 20004 Purpose of Disbursement Mtg. exp., food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.35 Date of Disbursement 02 / 09 / 2011
	Category/Type Amount of Each Disbursement this Period 279.40 [MEMO ITEM]	

C. Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 Leesburg Pike City Falls Church State VA Zip Code 22043 Purpose of Disbursement Database Management Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.26 Date of Disbursement 02 / 09 / 2011
	Category/Type Amount of Each Disbursement this Period 500.00 [MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) Custom Scoop Mailing Address 130 Pembroke Road Ste. 150 City Concord State NH Zip Code 3301 Purpose of Disbursement Press Clippings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.24 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 1
	Amount of Each Disbursement this Period 250.00 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) FedEx Mailing Address 942 S Shady Grove Road City Memphis State TN Zip Code 38120 Purpose of Disbursement Shipping Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.30 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 1
	Amount of Each Disbursement this Period 58.02 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Interface Media Group Mailing Address PO Box 57138 City Washington State DC Zip Code 20036 Purpose of Disbursement DVD Production Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.27 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 9 / 2 0 1 1
	Amount of Each Disbursement this Period 1880.97 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Sofitel Hotel - DC</p> <p>Mailing Address 806 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Mtg. exp., food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.23</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="118.95"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.29</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1683.40"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Visa</p> <p>Mailing Address PO Box 4513</p> <p>City Carol Stream State IL Zip Code 60197</p> <p>Purpose of Disbursement Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.22</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="51.17"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
Washington Courier

Mailing Address 5520 Cherokee Avenue

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
Courier Service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SC21CCD.25
Date of Disbursement

02 / 09 / 2011

Amount of Each Disbursement this Period

100.43

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address PO Box 4513

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Credit Card Payment-See Memo Entries

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21CCP.6
Date of Disbursement

03 / 08 / 2011

Amount of Each Disbursement this Period

144.60

C.

Full Name (Last, First, Middle Initial)
AT&T

Mailing Address PO Box 6416

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Internet Service

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SC21CCD.41
Date of Disbursement

03 / 08 / 2011

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

144.60

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) USPS Mailing Address 1400 L Street, NW City Washington State DC Zip Code 20005 Purpose of Disbursement Postage, gen. admin. usage Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.40 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 1 1
	Amount of Each Disbursement this Period 39.60 [MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Visa Mailing Address PO Box 4513 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.39 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 1 1
	Amount of Each Disbursement this Period 5.00 [MEMO ITEM]

C. Full Name (Last, First, Middle Initial) Visa Mailing Address PO Box 4513 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Credit Card Payment-See Memo Entries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21CCP.7 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 1 1
	Amount of Each Disbursement this Period 3170.24

SUBTOTAL of Disbursements This Page (optional) ▶	3170.24
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)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 6416 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.62 Date of Disbursement 03 / 08 / 2011 Amount of Each Disbursement this Period 25.00 [MEMO ITEM]
	Category/Type	[MEMO ITEM]

B. Full Name (Last, First, Middle Initial) Chicken Out Catering Mailing Address 15952 Shady Grove Road City Gaithersburg State MD Zip Code 20877 Purpose of Disbursement Meeting Exp., catering Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.57 Date of Disbursement 03 / 08 / 2011 Amount of Each Disbursement this Period 238.99 [MEMO ITEM]
	Category/Type	[MEMO ITEM]

C. Full Name (Last, First, Middle Initial) CMDI Mailing Address 7704 Leesburg Pike City Falls Church State VA Zip Code 22043 Purpose of Disbursement Database Management Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.54 Date of Disbursement 03 / 08 / 2011 Amount of Each Disbursement this Period 500.00 [MEMO ITEM]
	Category/Type	[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	0.00
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: SC21CCD.49 Date of Disbursement 03 / 08 / 2011
	Mailing Address 942 S Shady Grove Road	Amount of Each Disbursement this Period 78.69
	City Memphis State TN Zip Code 38120	
	Purpose of Disbursement Shipping	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Godaddy.com	Transaction ID: SC21CCD.51 Date of Disbursement 03 / 08 / 2011
	Mailing Address 14455 N Hayden Road	Amount of Each Disbursement this Period 587.30
	City Scottsdale State AZ Zip Code 85260	
	Purpose of Disbursement Internet Expense	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Network Solutions, LLC	Transaction ID: SC21CCD.48 Date of Disbursement 03 / 08 / 2011
	Mailing Address 13861 Sunrise Valley Drive, #300	Amount of Each Disbursement this Period 1063.60
	City Herndon State VA Zip Code 20171	
	Purpose of Disbursement Internet Expense	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) USPS	Transaction ID: SC21CCD.46 Date of Disbursement 03 / 08 / 2011
	Mailing Address 475 L'Enfant Plaza, SW	Amount of Each Disbursement this Period 501.00
	City Washington State DC Zip Code 20260	
	Purpose of Disbursement Postage	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SC21CCD.45 Date of Disbursement 03 / 08 / 2011
	Mailing Address PO Box 4513	Amount of Each Disbursement this Period 5.00
	City Carol Stream State IL Zip Code 60197	
	Purpose of Disbursement Fees	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Washington Courier	Transaction ID: SC21CCD.50 Date of Disbursement 03 / 08 / 2011
	Mailing Address 5520 Cherokee Avenue	Amount of Each Disbursement this Period 101.64
	City Alexandria State VA Zip Code 22312	
	Purpose of Disbursement Courier Service	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Visa Mailing Address PO Box 4513 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Credit Card Payment-See Memo Entries Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21CCP.8 Date of Disbursement 04 / 14 / 2011 Amount of Each Disbursement this Period 2626.61 Category/Type
B.	Full Name (Last, First, Middle Initial) AT&T Mailing Address PO Box 6416 City Carol Stream State IL Zip Code 60197 Purpose of Disbursement Internet Service Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.79 Date of Disbursement 04 / 14 / 2011 Amount of Each Disbursement this Period 25.00 Category/Type [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) CEO Update Mailing Address 1990 M Street, NW 8th Floor City Washington State DC Zip Code 20036 Purpose of Disbursement Subscription Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SC21CCD.69 Date of Disbursement 04 / 14 / 2011 Amount of Each Disbursement this Period 395.00 Category/Type [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

2626.61

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) CMDI</p> <p>Mailing Address 7704 Leesburg Pike</p> <p>City Falls Church State VA Zip Code 22043</p> <p>Purpose of Disbursement Database Management</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.66</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="548.30"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Godaddy.com</p> <p>Mailing Address 14455 N Hayden Road</p> <p>City Scottsdale State AZ Zip Code 85260</p> <p>Purpose of Disbursement Internet Expense</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.63</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="278.02"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Hay Adams</p> <p>Mailing Address 800 16th Street, NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Mtg. exp., food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.65</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="106.65"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Sofitel Hotel - DC</p> <p>Mailing Address 806 15th Street, NW</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Mtg. exp., food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.73</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="59.62"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address PO Box 66100</p> <p>City Chicago State IL Zip Code 60666</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.67</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="688.40"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Washington Courier</p> <p>Mailing Address 5520 Cherokee Avenue</p> <p>City Alexandria State VA Zip Code 22312</p> <p>Purpose of Disbursement Courier Service</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.74</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="118.11"/></p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 124 / 130

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

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NAME OF COMMITTEE (In Full)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
Westin - St. Francis

Mailing Address 335 Powell St.

City San Francisco State CA Zip Code 94102

Purpose of Disbursement
Lodging

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SC21CCD.77
Date of Disbursement

04 / 14 / 2011

Amount of Each Disbursement this Period

273.41

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)
Visa

Mailing Address PO Box 4513

City Carol Stream State IL Zip Code 60197

Purpose of Disbursement
Credit Card Payment-See Memo Entries

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SB21CCP.9
Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

310.56

C.

Full Name (Last, First, Middle Initial)
Digital River

Mailing Address 9625 W 76th Street

City Eden Prairie State MN Zip Code 55344

Purpose of Disbursement
Software

Candidate Name

Category/
Type

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: SC21CCD.80
Date of Disbursement

04 / 15 / 2011

Amount of Each Disbursement this Period

310.56

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

310.56

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 125 / 130

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Xigent, Inc.</p> <p>Mailing Address PO Box 320129</p> <p>City Alexandria State VA Zip Code 22320</p> <p>Purpose of Disbursement Website support and development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5267</p> <p>Date of Disbursement 01 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 825.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Xigent, Inc.</p> <p>Mailing Address PO Box 320129</p> <p>City Alexandria State VA Zip Code 22320</p> <p>Purpose of Disbursement Website support and development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5316</p> <p>Date of Disbursement 03 / 21 / 2011</p> <p>Amount of Each Disbursement this Period 1500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Xigent, Inc.</p> <p>Mailing Address PO Box 320129</p> <p>City Alexandria State VA Zip Code 22320</p> <p>Purpose of Disbursement Website support and development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 5337</p> <p>Date of Disbursement 04 / 14 / 2011</p> <p>Amount of Each Disbursement this Period 150.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2475.00

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

599716.94

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

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

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

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

Mailing Address
600 Fairmont Avenue
Ste. 306

Amount
301484.00

City State Zip Code
Towson MD 21286

Transaction ID: E.005
Office Sought: House State: NY
 Senate District: 26
 Presidential

Purpose of Expenditure
TV/Media Placement

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
Jack Davis

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 690365.70

Disbursement For: Primary General
 Other (specify) : Special General
2011

Full Name (Last, First, Middle, Initial) of Payee
Up Grade Films

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

Mailing Address
3299 K Street, NW
Ste. 200

Amount
12235.00

City State Zip Code
Washington DC 20007

Transaction ID: E.009
Office Sought: House State: NY
 Senate District: 26
 Presidential

Purpose of Expenditure
TV/Media Production

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
Jack Davis

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 690365.70

Disbursement For: Primary General
 Other (specify) : Special General
2011

(a) SUBTOTAL of Itemized Independent Expenditures	313719.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Margee Clancy
Signature

Date M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

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

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

Mailing Address
1780 W Sequoia Vista Circle

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

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

Name of Federal Candidate supported or Opposed by expenditure:
Jack Davis

Calendar Year-To-Date Per Election for Office Sought	690365.70
--	-----------

Date
05 / 13 / 2011

Amount
5167.00

Transaction ID: E.001

Office Sought: House State: NY
 Senate District: 26
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : Special General 2011

Full Name (Last, First, Middle, Initial) of Payee
Targeted Victory

Mailing Address
66 Canal Center Plaza
Ste. 501

City Alexandria	State VA	Zip Code 22314
--------------------	-------------	-------------------

Purpose of Expenditure On-Line Advertising	Category/Type
---	---------------

Name of Federal Candidate supported or Opposed by expenditure:
Jack Davis

Calendar Year-To-Date Per Election for Office Sought	690365.70
--	-----------

Date
05 / 14 / 2011

Amount
50000.00

Transaction ID: E.007

Office Sought: House State: NY
 Senate District: 26
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : Special General 2011

(a) SUBTOTAL of Itemized Independent Expenditures	55167.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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Margee Clancy
Signature

Date 06 / 23 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

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

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

Mailing Address
600 Fairmont Avenue
Ste. 306

City State Zip Code
Towson MD 21286

Purpose of Expenditure Category/Type
TV/Media Placement

Name of Federal Candidate supported or Opposed by expenditure:
Kathleen Hochul

Calendar Year-To-Date Per Election for Office Sought
690365.70

Date
05 / 17 / 2011

Amount
301484.00

Transaction ID: E.006

Office Sought: House State: NY
 Senate District: 26
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : Special General 2011

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

Mailing Address
1780 Sequoia Vista Circle

City State Zip Code
Salt Lake City UT 84104

Purpose of Expenditure Category/Type
Postage, Printing/Production

Name of Federal Candidate supported or Opposed by expenditure:
Jack Davis

Calendar Year-To-Date Per Election for Office Sought
690365.70

Date
05 / 17 / 2011

Amount
5167.00

Transaction ID: E.002

Office Sought: House State: NY
 Senate District: 26
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : Special General 2011

(a) SUBTOTAL of Itemized Independent Expenditures	306651.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Margee Clancy
Signature

Date 06 / 23 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

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

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

Mailing Address
PO Box 2192

City State Zip Code
Arlington VA 22202

Purpose of Expenditure
Phone Calls

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
Jack Davis

Calendar Year-To-Date Per Election for Office Sought
690365.70

Date
05 / 17 / 2011

Amount
603.45

Transaction ID: E.003

Office Sought: House State: NY
 Senate District: 26
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : Special General 2011

Full Name (Last, First, Middle, Initial) of Payee
Up Grade Films

Mailing Address
3299 K Street, NW
Ste. 200

City State Zip Code
Washington DC 20007

Purpose of Expenditure
TV/Media Production

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
Kathleen Hochul

Calendar Year-To-Date Per Election for Office Sought
690365.70

Date
05 / 17 / 2011

Amount
11965.00

Transaction ID: 5376

Office Sought: House State: NY
 Senate District: 26
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : Special General 2011

(a) SUBTOTAL of Itemized Independent Expenditures	12568.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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

Margee Clancy
Signature

Date 06 / 23 / 2011

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

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

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

Date
M M / D D / Y Y Y Y
0 5 / 2 6 / 2 0 1 1

Mailing Address
PO Box 2192

Amount
560.25

City State Zip Code
Arlington VA 22202

Transaction ID: E.004

Purpose of Expenditure
Phone Calls

Category/Type

Office Sought: House State: NY
 Senate District: 26
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Jack Davis

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 690365.70

Disbursement For: Primary General
 Other (specify) : Special General 2011

24 Hour Notice filed on 5/20/2011

Full Name (Last, First, Middle, Initial) of Payee
TargetPoint Consulting, Inc.

Date
M M / D D / Y Y Y Y
0 6 / 1 3 / 2 0 1 1

Mailing Address
66 Canal Center Plaza
No 555

Amount
1700.00

City State Zip Code
Alexandria VA 22314

Transaction ID: E.008

Purpose of Expenditure
NY-26 List Enhancement

Category/Type

Office Sought: House State: NY
 Senate District: 26
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Jane Corwin

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 690365.70

Disbursement For: Primary General
 Other (specify) : Special General 2011

24 Hour Notice filed on 5/18/2011

(a) SUBTOTAL of Itemized Independent Expenditures	2260.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	690365.70

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

Margee Clancy
Signature

Date M M / D D / Y Y Y Y
0 6 / 2 3 / 2 0 1 1