03/08/2014 14 : 31

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
American Crossroads	C C00487363
OL 1 1 V O 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	M M / D D / Y Y Y Y
Check if X 24-hour report 48-hour report New report Amends report file	ed on 03 08 2014
Full Name of Payee Connection Strategy LLC	Date of Public Distribution/Dissemination
Mailing Address P.O. Box 2192	03 07 2014
	Amount
City State Zip Code Arlington VA 22202	595.45 Transaction ID : E.001
Purpose of Expanditure	Date of Disbursement or Obligation
Purpose of Expenditure Phone Calls Category/ Type	03 / 10 / 2014
	ice Sought: X House District: 13
David Jolly Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought Dis 201	Sbursement For: Primary General Other (specify) ► Special General
Full Name of Payee	Date of Public Distribution/Dissemination
- Address	M M / D D / Y Y Y Y
Mailing Address	Amount
City State Zip Code	-
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	Mam / Dad / Yayayay
Name of Federal Candidate Support Off	fice Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	sbursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	595.45
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	595.45
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	• • • • • • • • • • • • • • • • • • • •
Caleb Crosby [Electronically Filed] Signature	03 08 2014
Signature	