

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name **American Conservative Union**

(b) Address (number and street) check if different than previously reported
1331 H Street NW Suite 500

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

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

2. FEC Identification Number

C C30001952

3. Is This Statement

New
or
 Amended

4. Covering Period

M M M / D D D / Y Y Y Y Y Y
02 / 06 / 2012
through
M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2012

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

M M M / D D D / Y Y Y Y Y Y
03 / 07 / 2012

(b) Communication Title ACU The Breaks

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

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

(e) Other, specify: _____

7. If the filer is an individual, unincorporated organization or qualified nonprofit corporation, were the disbursements made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name
Melissa Bowman

(b) Address (number and street)
1331 H Street NW Suite 500

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

(d) Name of Employer or Principal Place of Business (e) Occupation
American Conservative Union Director of Development

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

15589.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Melissa Bowman

SIGNATURE Melissa Bowman [Electronically Filed] DATE 03/09/2012

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

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

<p>A. Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group</p> <p>Mailing Address of Payee 815 Slaters Lane</p> <p>City State Zip Code Alexandria VA 22314</p> <p>Name of Employer Occupation</p> <p>Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads, ACU The Breaks Roby</p>	<p>Date of Disbursement or Obligation MM / DD / YYYY 02 / 09 / 2012</p> <p>Amount 1500.00</p> <p>Communication Date MM / DD / YYYY 02 / 09 / 2012</p> <p>Transaction ID : F93.4100</p>
<p>Name of Federal Candidate Office Sought: <input checked="" type="checkbox"/> House State: <u>AL</u> MARTHA ROBY <input type="checkbox"/> Senate District: <u>02</u> <input type="checkbox"/> President</p> <p>Transaction ID : F94.4103</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ Barack Obama <input type="checkbox"/> Senate District: <u>00</u> <input checked="" type="checkbox"/> President</p> <p>Transaction ID : F94.4114</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p>	<p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p>
<p>B. Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group</p> <p>Mailing Address of Payee 815 Slaters Lane</p> <p>City State Zip Code Alexandria VA 22314</p> <p>Name of Employer Occupation</p> <p>Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads, ACU The Breaks Palazzo</p>	<p>Date of Disbursement or Obligation MM / DD / YYYY 02 / 12 / 2012</p> <p>Amount 1892.00</p> <p>Communication Date MM / DD / YYYY 02 / 12 / 2012</p> <p>Transaction ID : F93.4107</p>
<p>Name of Federal Candidate Office Sought: <input checked="" type="checkbox"/> House State: <u>MS</u> STEVEN MCCARTY PALAZZO <input type="checkbox"/> Senate District: <u>04</u> <input type="checkbox"/> President</p> <p>Transaction ID : F94.4108</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ Barack Obama <input type="checkbox"/> Senate District: <u>00</u> <input checked="" type="checkbox"/> President</p> <p>Transaction ID : F94.4116</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p>	<p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p>
<p>SUBTOTAL of Disbursements/Obligations This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)</p>	<p>3392.00</p>

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

<p>A. Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group</p> <p>Mailing Address of Payee 815 Slaters Lane</p> <p>City State Zip Code Alexandria VA 22314</p> <p>Name of Employer Occupation</p> <p>Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads, ACU The Breaks Hurt</p>	<p>Date of Disbursement or Obligation MM / DD / YYYY 02 / 12 / 2012</p> <p>Amount 2637.00</p> <p>Communication Date MM / DD / YYYY 02 / 12 / 2012</p> <p>Transaction ID : F93.4109</p>
<p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ Barack Obama <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President</p> <p>Transaction ID : F94.4117</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p>	<p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p>
<p>B. Full Name (Last, First, Middle Initial) of Payee American Media & Advocacy Group</p> <p>Mailing Address of Payee 815 Slaters Lane</p> <p>City State Zip Code Alexandria VA 22314</p> <p>Name of Employer Occupation</p> <p>Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads, ACU The Breaks Schilling</p>	<p>Date of Disbursement or Obligation MM / DD / YYYY 02 / 19 / 2012</p> <p>Amount 1560.00</p> <p>Communication Date MM / DD / YYYY 02 / 19 / 2012</p> <p>Transaction ID : F93.4105</p>
<p>Name of Federal Candidate Office Sought: <input checked="" type="checkbox"/> House State: IL ROBERT T MR. SCHILLING <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President</p> <p>Transaction ID : F94.4106</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ Barack Obama <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President</p> <p>Transaction ID : F94.4118</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p>	<p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p>
<p>SUBTOTAL of Disbursements/Obligations This Page (optional) ▶</p> <p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)</p>	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

<p>A. Full Name (Last, First, Middle Initial) of Payee Mentzer Media Services, Inc.</p> <hr/> <p>Mailing Address of Payee 600 Fairmount Ave. Suite 306</p> <hr/> <p>City State Zip Code Towson MD 21286</p> <hr/> <p>Name of Employer Occupation</p> <hr/> <p>Purpose of Disbursement (Including title(s) of communication(s)) Radio Ads, ACU The Breaks Bacchus</p>	<p>Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 03 / 06 / 2012</p> <p>Amount 8000.00</p> <p>Communication Date M M / D D / Y Y Y Y Y Y 03 / 07 / 2012</p> <p>Transaction ID : F93.4110</p>
<p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ BARACK OBAMA <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President</p> <p>Transaction ID : F94.4102</p> <p>Name of Federal Candidate Office Sought: <input checked="" type="checkbox"/> House State: AL SPENCER T III BACHUS <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President</p> <p>Transaction ID : F94.4113</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p>	<p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p>
<p>B. Full Name (Last, First, Middle Initial) of Payee</p> <hr/> <p>Mailing Address of Payee</p> <hr/> <p>City State Zip Code</p> <hr/> <p>Name of Employer Occupation</p> <hr/> <p>Purpose of Disbursement (Including title(s) of communication(s))</p>	<p>Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y</p> <p>Amount</p> <p>Communication Date M M / D D / Y Y Y Y Y Y</p>
<p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p> <p>Name of Federal Candidate Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President</p>	<p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p> <p>Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____</p>
<p>SUBTOTAL of Disbursements/Obligations This Page (optional) ▶</p> <hr/> <p>TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)</p>	<p>8000.00</p> <hr/> <p>15589.00</p>