

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period / / through / /

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

Type or Print Name of Treasurer Caleb Crosby

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Crossroads

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2016"/>		<input type="text" value="3070065.23"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="2784175.98"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="66898.85"/>	<input type="text" value="231431.30"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="2851074.83"/>	<input type="text" value="3301496.53"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="311873.21"/>	<input type="text" value="762294.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2539201.62"/>	<input type="text" value="2539201.62"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Crossroads

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	36000.00	140057.45
(ii) Unitemized	350.00	825.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	36350.00	140882.45
(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)	36350.00	140882.45
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).....	30548.85	90548.85
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	66898.85	231431.30
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	66898.85	231431.30

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	301420.21	656111.91
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	301420.21	656111.91
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	10453.00	106183.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	311873.21	762294.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	311873.21	762294.91

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	36350.00	140882.45
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36350.00	140882.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	301420.21	656111.91
37. Offsets to Operating Expenditures (from Line 15, page 3).....	30548.85	90548.85
38. Net Operating Expenditures (subtract Line 37 from Line 36)	270871.36	565563.06

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

1. Unless otherwise noted, none of the expenditures reported are allocable to a candidate. 2. For all Ultimate Vendor Payee disbursements, any transaction below the itemization threshold in the aggregate will not appear as a memo entry

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 41
<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. WILLIAM HOUSTON
Full Name (Last, First, Middle Initial)

Mailing Address 2514 EL GRECO

City AUSTIN State TX Zip Code 78703-1510

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 24 / 2016
Transaction ID : SA11.13557

Amount of Each Receipt this Period 1000.00

Memo Item CONTRIBUTION

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

Mailing Address 1012 FIRETHORNE CLUB DRIVE

City WAXHAW State NC Zip Code 28173-6552

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 03 / 25 / 2016
Transaction ID : SA11.13558

Amount of Each Receipt this Period 25000.00

Memo Item CONTRIBUTION

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

Mailing Address 379 COOK ST

City DENVER State CO Zip Code 80206-4422

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

Name of Employer HALLADOR ENERGY COMPANY Occupation CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 03 / 31 / 2016
Transaction ID : SA11.13560

Amount of Each Receipt this Period 10000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	36000.00
TOTAL This Period (last page this line number only).....	36000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 41
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. ADP INC
Full Name (Last, First, Middle Initial)
Mailing Address 504 CLINTON CENTER DRIVE, STE 4400

City CLINTON	State MS	Zip Code 39056
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
548.85

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 04 / 2016

Transaction ID : SA15.7076

Amount of Each Receipt this Period
548.85

Memo Item
REFUND - PAYROLL PROCESSING

B. SENATE LEADERSHIP FUND
Full Name (Last, First, Middle Initial)
Mailing Address 45 N HILL DR, STE 100

City WARRENTON	State VA	Zip Code 20186
-------------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
90000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SA15.7075

Amount of Each Receipt this Period
30000.00

Memo Item
OVERHEAD AND ADMINSTRATIVE SERVICES

C.
Full Name (Last, First, Middle Initial)
Mailing Address _____

City _____	State _____	Zip Code _____
------------	-------------	----------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	30548.85
TOTAL This Period (last page this line number only).....	30548.85

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. UNUM LIFE INSURANCE COMPANY OF AMERICA

Mailing Address 601 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 01 / 2016

Transaction ID : **SB21B.I6990**

Amount of Each Disbursement this Period

273.52

Memo Item

Full Name (Last, First, Middle Initial)

B. STEVEN LAW

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
ULTIMATE VENDOR - DOES NOT MEET ITEMIZATION THRESHOLD

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I7010**

Amount of Each Disbursement this Period

31.64

Memo Item

Full Name (Last, First, Middle Initial)

C. ATCHLEY & ASSOCIATES

Mailing Address 6850 AUSTIN CENTER BLVD, STE 180

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6953**

Amount of Each Disbursement this Period

1293.59

Memo Item

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

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

1598.75

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. AXIS RESEARCH INC

Mailing Address 107 S WEST STREET, PMB 148

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6955**

Amount of Each Disbursement this Period

16554.76

Memo Item

Full Name (Last, First, Middle Initial)

B. BLACK ROCK GROUP LLC

Mailing Address 66 CANAL CENTER PLAZA, STE 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING, ADVOCACY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6959**

Amount of Each Disbursement this Period

10000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. BLACK ROCK GROUP LLC

Mailing Address 66 CANAL CENTER PLAZA, STE 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING, ADVOCACY

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6960**

Amount of Each Disbursement this Period

2659.84

Memo Item

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

29214.60

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

Full Name (Last, First, Middle Initial)

A. CAPITOL COMPUTER EXCHANGE INC

Mailing Address 4487 FORBES BLVD

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECHNICAL SUPPORT / SOFTWARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : SB21B.I6961

Amount of Each Disbursement this Period

2626.72

Memo Item

Full Name (Last, First, Middle Initial)

B. CFC CONSULTING INC

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : SB21B.I6963

Amount of Each Disbursement this Period

3500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. DC TREASURER

Mailing Address P.O. BOX 96019

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : SB21B.I6967

Amount of Each Disbursement this Period

250.00

Memo Item

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

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

6376.72

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. DMM MEDIA INC

Mailing Address 1911 N. FORT MYER DRIVE, STE 400

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement
CONSULTING, MEDIA

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6971**

Amount of Each Disbursement this Period

654.40

Memo Item

Full Name (Last, First, Middle Initial)

B. DRIVER EIGHT MEDIA LLC

Mailing Address 1875 CONNECTICUT AVE NW, 10TH FLR

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6972**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DRIVE, SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6973**

Amount of Each Disbursement this Period

15562.40

Memo Item

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

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

18716.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. RIVERWOOD STRATEGIES

Mailing Address 439 E SHORE DRIVE, STE 100

City State Zip Code
EAGLE ID 83616

Purpose of Disbursement
POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : **SB21B.I6983**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ROCK CONSULTING

Mailing Address 1220 KNIGHTSBRIDGE COURT, APT 305

City State Zip Code
CHARLOTTESVILLE VA 22911

Purpose of Disbursement
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : **SB21B.I6984**

Amount of Each Disbursement this Period

825.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ROCK CONSULTING

Mailing Address 1220 KNIGHTSBRIDGE COURT, APT 305

City State Zip Code
CHARLOTTESVILLE VA 22911

Purpose of Disbursement
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 03 / 2016

Transaction ID : **SB21B.I6985**

Amount of Each Disbursement this Period

30.78

Memo Item

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

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

3355.78

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. THE AVASCENT GROUP

Mailing Address 1615 L STREET NW, STE 1200

City WASHINGTON State DC Zip Code 20036-5610

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6988**

Amount of Each Disbursement this Period

9356.58

Memo Item

Full Name (Last, First, Middle Initial)

B. THE MK GROUP LLC

Mailing Address 5905 GLOSTER ROAD

City BETHESDA State MD Zip Code 20816

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 03 / 2016

Transaction ID : **SB21B.I6989**

Amount of Each Disbursement this Period

4375.00

Memo Item

Full Name (Last, First, Middle Initial)

C. ADP INC

Mailing Address 504 CLINTON CENTER DRIVE, STE 4400

City CLINTON State MS Zip Code 39056

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2016

Transaction ID : **SB21B.I6945**

Amount of Each Disbursement this Period

119.90

Memo Item

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

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

13851.48

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS - CARD

Mailing Address P.O. BOX 1270

City NEWARK State NJ Zip Code 07101

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : **SB21B.I6952**

Amount of Each Disbursement this Period

6021.76

Memo Item

Full Name (Last, First, Middle Initial)

B. ALLIED TELECOM

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

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
INTERNET AND PHONE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : **SB21B.I7034**

Amount of Each Disbursement this Period

614.39

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City FT WORTH State TX Zip Code 76155

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : **SB21B.I7035**

Amount of Each Disbursement this Period

447.05

Memo Item

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

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

6021.76

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FT WORTH TX 76155

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Transaction ID : SB21B.I7039

Amount of Each Disbursement this Period

411.60

Memo Item

Full Name (Last, First, Middle Initial)

B. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FT WORTH TX 76155

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Transaction ID : SB21B.I7040

Amount of Each Disbursement this Period

435.72

Memo Item

Full Name (Last, First, Middle Initial)

C. AMERICAN AIRLINES

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code
FT WORTH TX 76155

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2016

Transaction ID : SB21B.I7041

Amount of Each Disbursement this Period

373.55

Memo Item

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

0.00

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

Full Name (Last, First, Middle Initial)

A. BROOK FURNITURE RENTAL INC

Mailing Address 24997 NETWORK PLACE

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement
OFFICE FURNITURE RENTAL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : **SB21B.I7042**

Amount of Each Disbursement this Period

368.94

Memo Item

Full Name (Last, First, Middle Initial)

B. CAREY

Mailing Address 5300 SPECTRUM DRIVE, STE D

City FREDRICK State MD Zip Code 21703

Purpose of Disbursement
TRANSPORTATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : **SB21B.I7044**

Amount of Each Disbursement this Period

93.11

Memo Item

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PIKE
SUITE 400

City FALLS CHURCH State VA Zip Code 22043-2245

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : **SB21B.I7045**

Amount of Each Disbursement this Period

500.00

Memo Item

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. GUERNSEY OFFICE PRODUCTS INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

Mailing Address P.O. BOX 10846

Transaction ID : SB21B.I7036

City State Zip Code
CHANTILLY VA 20153

Amount of Each Disbursement this Period

75.18

Purpose of Disbursement
OFFICE SUPPLIES

Category/ Type

Candidate Name

Memo Item

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

Full Name (Last, First, Middle Initial)

B. LAZ PARKING

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

Mailing Address P.O. BOX 759311

Transaction ID : SB21B.I7057

City State Zip Code
BALTIMORE MD 21275

Amount of Each Disbursement this Period

318.75

Purpose of Disbursement
PARKING

Category/ Type

Candidate Name

Memo Item

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

Full Name (Last, First, Middle Initial)

C. LEXISNEXIS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		08		2016

Mailing Address P.O. BOX 7247-7090

Transaction ID : SB21B.I7058

City State Zip Code
PHILADELPHIA PA 19170

Amount of Each Disbursement this Period

695.10

Purpose of Disbursement
SUBSCRIPTION

Category/ Type

Candidate Name

Memo Item

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)..... ▶

0.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. SOUTHWEST AIRLINES

Mailing Address P.O. BOX 36647-1CR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : SB21B.I7037

Amount of Each Disbursement this Period

202.99

Memo Item

Full Name (Last, First, Middle Initial)

B. VERIZON WIRELESS

Mailing Address 1314 F STREET NW

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
CELL PHONES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : SB21B.I7065

Amount of Each Disbursement this Period

270.33

Memo Item

Full Name (Last, First, Middle Initial)

C. VICEROY HOTEL

Mailing Address 120 WEST 57TH STREET

City NEW YORK State NY Zip Code 10019

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2016

Transaction ID : SB21B.I7066

Amount of Each Disbursement this Period

312.17

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:
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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

Full Name (Last, First, Middle Initial)

A. CAREFIRST BCBS

Mailing Address P.O. BOX 79749

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 10 / 2016

Transaction ID : **SB21B.I6962**

Amount of Each Disbursement this Period: 10354.75

Memo Item

Full Name (Last, First, Middle Initial)

B. DEEP ROOT ANALYTICS LLC

Mailing Address 1100 WILSON BLVD, STE 950

City ARLINGTON State VA Zip Code 22209

Purpose of Disbursement POLITICAL STRATEGY CONSULTING

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 10 / 2016

Transaction ID : **SB21B.I6968**

Amount of Each Disbursement this Period: 50800.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX ST, STE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement WEBSITE HOSTING / DEVELOPMENT

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: MM / DD / YYYY
03 / 14 / 2016

Transaction ID : **SB21B.I6986**

Amount of Each Disbursement this Period: 4500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 65654.75

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. NICHOLAS BALLAS

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I6996**

Amount of Each Disbursement this Period

538.56

Memo Item

Full Name (Last, First, Middle Initial)

B. MALLORY BICHUNSKY

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I6999**

Amount of Each Disbursement this Period

493.07

Memo Item

Full Name (Last, First, Middle Initial)

C. GRACE EBERHART

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7001**

Amount of Each Disbursement this Period

692.05

Memo Item

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

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

1723.68

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. JENNIFER FAY

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7004**

Amount of Each Disbursement this Period

1530.05

Memo Item

Full Name (Last, First, Middle Initial)

B. BRITTNEY GODOY

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7006**

Amount of Each Disbursement this Period

1339.07

Memo Item

Full Name (Last, First, Middle Initial)

C. STEVEN LAW

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7011**

Amount of Each Disbursement this Period

4173.98

Memo Item

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

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

7043.10

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. STEFAN MEDVETZ

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7013**

Amount of Each Disbursement this Period

561.81

Memo Item

Full Name (Last, First, Middle Initial)

B. JENNIFER MUELLER

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7015**

Amount of Each Disbursement this Period

850.16

Memo Item

Full Name (Last, First, Middle Initial)

C. KRISTOPHER MUNGER

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7017**

Amount of Each Disbursement this Period

459.50

Memo Item

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

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

1871.47

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. KELLY NALLEN

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7019**

Amount of Each Disbursement this Period

1058.20

Memo Item

Full Name (Last, First, Middle Initial)

B. MARK PETTIT

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7021**

Amount of Each Disbursement this Period

408.79

Memo Item

Full Name (Last, First, Middle Initial)

C. SEAN PHILBIN

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7024**

Amount of Each Disbursement this Period

1304.11

Memo Item

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

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

2771.10

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. IAN PRIOR

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7026**

Amount of Each Disbursement this Period

1656.22

Memo Item

Full Name (Last, First, Middle Initial)

B. CAITLIN SULLIVAN

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7029**

Amount of Each Disbursement this Period

725.76

Memo Item

Full Name (Last, First, Middle Initial)

C. KATHERINE WILLIAMS

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I7031**

Amount of Each Disbursement this Period

1112.82

Memo Item

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

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

3494.80

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. BENEFITWALLET

Mailing Address P.O. BOX 1584

City SECAUCUS State NJ Zip Code 07094

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I6956**

Amount of Each Disbursement this Period

50.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BENEFITWALLET

Mailing Address P.O. BOX 1584

City SECAUCUS State NJ Zip Code 07094

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I6957**

Amount of Each Disbursement this Period

525.00

Memo Item

Full Name (Last, First, Middle Initial)

C. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I6965**

Amount of Each Disbursement this Period

46.96

Memo Item

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

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

621.96

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF EMPLOYMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Mailing Address P.O. BOX 9664

Transaction ID : SB21B.I6969

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

303.96

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Memo Item

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. OFFICE OF TAX AND REVENUE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Mailing Address P.O. BOX 96385

Transaction ID : SB21B.I6976

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

502.25

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Memo Item

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. PRINCIPAL FINANCIAL GROUP

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		15		2016

Mailing Address P.O. BOX 10372

Transaction ID : SB21B.I6978

City DES MOINES State IA Zip Code 50306

Amount of Each Disbursement this Period

2741.72

Purpose of Disbursement
EMPLOYEE BENEFITS

--

Candidate Name

Category/
Type

Memo Item

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

3547.93

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I6991**

Amount of Each Disbursement this Period

7020.35

Memo Item

Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 15 / 2016

Transaction ID : **SB21B.I6993**

Amount of Each Disbursement this Period

598.32

Memo Item

Full Name (Last, First, Middle Initial)

C. ANNE BEYERSDORFER

Mailing Address 2315 CHAIN BRIDGE ROAD NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement
CONSULTING, MEDIA

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 16 / 2016

Transaction ID : **SB21B.I6998**

Amount of Each Disbursement this Period

7500.00

Memo Item

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

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

15118.67

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. GRACE EBERHART		Date of Disbursement MM / DD / YYYY 03 / 16 / 2016
Mailing Address P.O. BOX 34413		Transaction ID : SB21B.I7002
City WASHINGTON	State DC	
Zip Code 20043	Purpose of Disbursement REIMBURSEMENT - TAXIS	Amount of Each Disbursement this Period 6.70
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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:		

Full Name (Last, First, Middle Initial) B. IAN PRIOR		Date of Disbursement MM / DD / YYYY 03 / 16 / 2016
Mailing Address P.O. BOX 34413		Transaction ID : SB21B.I7027
City WASHINGTON	State DC	
Zip Code 20043	Purpose of Disbursement REIMBURSEMENT - TAXIS	Amount of Each Disbursement this Period 11.59
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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:		

Full Name (Last, First, Middle Initial) C. RED OAK STRATEGIC LLC		Date of Disbursement MM / DD / YYYY 03 / 16 / 2016
Mailing Address P.O. BOX 2561		Transaction ID : SB21B.I6981
City ALEXANDRIA	State VA	
Zip Code 22301	Purpose of Disbursement CONSULTING, ADVOCACY	Amount of Each Disbursement this Period 4488.48
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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)..... ▶

4506.77

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. BRITTNEY GODOY

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
REIMBURSEMENT - TAXIS AND PARKING

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2016

Transaction ID : **SB21B.I7007**

Amount of Each Disbursement this Period

133.72

Memo Item

Full Name (Last, First, Middle Initial)

B. BRITTNEY GODOY

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
ULTIMATE VENDOR - DOES NOT MEET ITEMIZATION THRESHOLD

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2016

Transaction ID : **SB21B.I7008**

Amount of Each Disbursement this Period

237.67

Memo Item

Full Name (Last, First, Middle Initial)

C. MARK PETTIT

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
REIMBURSEMENT - TAXIS

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2016

Transaction ID : **SB21B.I7022**

Amount of Each Disbursement this Period

7.83

Memo Item

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

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

379.22

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. CFC CONSULTING INC

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2016

Transaction ID : SB21B.I6964

Amount of Each Disbursement this Period

403.63

Memo Item

Full Name (Last, First, Middle Initial)

B. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DRIVE, SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2016

Transaction ID : SB21B.I6974

Amount of Each Disbursement this Period

15000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. PUBLIC OPINION STRATEGIES

Mailing Address 214 NORTH FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 23 / 2016

Transaction ID : SB21B.I6980

Amount of Each Disbursement this Period

69500.00

Memo Item

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

84903.63

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

Full Name (Last, First, Middle Initial)

A. ADP INC

Mailing Address 504 CLINTON CENTER DRIVE, STE 4400

City CLINTON State MS Zip Code 39056

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I6950**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. NICHOLAS BALLAS

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I6997**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. MALLORY BICHUNSKY

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I7000**

Amount of Each Disbursement this Period

Memo Item

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

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. GRACE EBERHART

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7003**

Amount of Each Disbursement this Period

692.04

Memo Item

Full Name (Last, First, Middle Initial)

B. JENNIFER FAY

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7005**

Amount of Each Disbursement this Period

1530.04

Memo Item

Full Name (Last, First, Middle Initial)

C. BRITTNEY GODOY

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7009**

Amount of Each Disbursement this Period

1339.06

Memo Item

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

3561.14

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

Full Name (Last, First, Middle Initial)

A. STEVEN LAW

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7012**

Amount of Each Disbursement this Period

4173.99

Memo Item

Full Name (Last, First, Middle Initial)

B. STEFAN MEDVETZ

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7014**

Amount of Each Disbursement this Period

561.81

Memo Item

Full Name (Last, First, Middle Initial)

C. JENNIFER MUELLER

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7016**

Amount of Each Disbursement this Period

850.15

Memo Item

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

5585.95

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

Full Name (Last, First, Middle Initial)

A. KRISTOPHER MUNGER

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7018**

Amount of Each Disbursement this Period

459.49

Memo Item

Full Name (Last, First, Middle Initial)

B. KELLY NALLEN

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7020**

Amount of Each Disbursement this Period

1058.20

Memo Item

Full Name (Last, First, Middle Initial)

C. MARK PETTIT

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7023**

Amount of Each Disbursement this Period

408.80

Memo Item

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

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

1926.49

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. SEAN PHILBIN

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7025**

Amount of Each Disbursement this Period

1304.12

Memo Item

Full Name (Last, First, Middle Initial)

B. IAN PRIOR

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7028**

Amount of Each Disbursement this Period

1656.22

Memo Item

Full Name (Last, First, Middle Initial)

C. CAITLIN SULLIVAN

Mailing Address P.O. BOX 34413

City WASHINGTON State DC Zip Code 20043-4413

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : **SB21B.I7030**

Amount of Each Disbursement this Period

725.75

Memo Item

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

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

3686.09

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. KATHERINE WILLIAMS		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address P.O. BOX 34413		Transaction ID : SB21B.I7032
City WASHINGTON	State DC	
Zip Code 20043	Purpose of Disbursement PAYROLL	Amount of Each Disbursement this Period 1112.80
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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:		

Full Name (Last, First, Middle Initial) B. ATCHLEY & ASSOCIATES		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address 6850 AUSTIN CENTER BLVD, STE 180		Transaction ID : SB21B.I6954
City AUSTIN	State TX	
Zip Code 78731	Purpose of Disbursement ACCOUNTING SERVICES	Amount of Each Disbursement this Period 1784.25
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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:		

Full Name (Last, First, Middle Initial) C. BENEFITWALLET		Date of Disbursement MM / DD / YYYY 03 / 31 / 2016
Mailing Address P.O. BOX 1584		Transaction ID : SB21B.I6958
City SECAUCUS	State NJ	
Zip Code 07094	Purpose of Disbursement HEALTH INSURANCE	Amount of Each Disbursement this Period 50.00
Candidate Name	Category/Type	<input type="checkbox"/> Memo Item
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)..... ▶

2947.05

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : SB21B.I6966

Amount of Each Disbursement this Period

46.96

Memo Item

Full Name (Last, First, Middle Initial)

B. DEPARTMENT OF EMPLOYMENT SERVICES

Mailing Address P.O. BOX 9664

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : SB21B.I6970

Amount of Each Disbursement this Period

187.08

Memo Item

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL JOSEFIK PLLC

Mailing Address 45 NORTH HILL DRIVE, SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2016

Transaction ID : SB21B.I6975

Amount of Each Disbursement this Period

262.50

Memo Item

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

496.54

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. OFFICE OF TAX AND REVENUE

Mailing Address P.O. BOX 96385

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2016

Transaction ID : **SB21B.I6977**

Amount of Each Disbursement this Period: 502.25

Memo Item

Full Name (Last, First, Middle Initial)

B. PRINCIPAL FINANCIAL GROUP

Mailing Address P.O. BOX 10372

City DES MOINES State IA Zip Code 50306

Purpose of Disbursement EMPLOYEE BENEFITS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2016

Transaction ID : **SB21B.I6979**

Amount of Each Disbursement this Period: 2741.72

Memo Item

Full Name (Last, First, Middle Initial)

C. US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 03 / 31 / 2016

Transaction ID : **SB21B.I6992**

Amount of Each Disbursement this Period: 7011.66

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10255.63

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

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 31 / 2016

Transaction ID : SB21B.I6994

Amount of Each Disbursement this Period

598.32

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

598.32

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

301402.70

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER ▼ C C00487363
---	--

Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee RICHARD SALES MEDIA LLC <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1702 E HIGHLAND AVE, STE 408 SUITE 408		Amount <input type="text"/>	
City PHOENIX	State AZ	Zip Code 85016-4630	Transaction ID : SE24.6982
Purpose of Expenditure WEB AD PRODUCTION - SEE NOTICE FILED 3/29/16		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
10453.00		3000.00	

Full Name of Payee TARGETED VICTORY <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1033 NORTH FAIRFAX ST, STE 400		Amount <input type="text"/>	
City ALEXANDRIA	State VA	Zip Code 22314	Transaction ID : SE24.6987
Purpose of Expenditure ONLINE ADVERTISING - SEE NOTICE FILED 3/29/16		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate HILLARY CLINTON		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input checked="" type="checkbox"/> President <input type="checkbox"/> Senate State: <u>DC</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____
10453.00		7453.00	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<input type="text"/>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<input type="text"/>
(c) TOTAL Independent Expenditures.....▶	<input type="text"/>

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.

CALEB CROSBY [Electronically Filed] Date / /

Signature