

FEC FORM 9

24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Person Making the Disbursements/Obligations

(a) Name **Crossroads Grassroots Policy Strategies**

(b) Address (number and street) check if different than previously reported
 1401 New York Avenue NW
 Ste. 1200

(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 C30001655

3. Is This Statement

New
 or
 Amended

4. Covering Period

M M M / D D D / Y Y Y Y Y Y
 12 / 09 / 2011
 through
 M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

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

M M M / D D D / Y Y Y Y Y Y
 12 / 12 / 2011

(b) Communication Title

Typical

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
 Caleb Crosby

(b) Address (number and street)
 1401 New York Avenue NW
 Ste. 1200

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

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

9. Total Donations This Statement

0.00

10. Total Disbursements/Obligations This Statement

20245.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Caleb Crosby

SIGNATURE Caleb Crosby [Electronically Filed] DATE 12/13/2011

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

List of Person(s) Sharing/Exercising Control
(use additional pages as necessary)

11. Person(s) Sharing/Exercising Control

A. (a) Name		Transaction ID : F91.4110	
Steven Law			
(b) Address (number and street)	1401 New York Avenue NW Ste. 1200		
(c) City, State and ZIP Code	Washington	DC	20005
(d) Name of Employer or Principal Place of Business	Crossroads GPS	(e) Occupation	Executive Director
B. (a) Name			
(b) Address (number and street)			
(c) City, State and ZIP Code			
(d) Name of Employer or Principal Place of Business		(e) Occupation	
C. (a) Name			
(b) Address (number and street)			
(c) City, State and ZIP Code			
(d) Name of Employer or Principal Place of Business		(e) Occupation	
D. (a) Name			
(b) Address (number and street)			
(c) City, State and ZIP Code			
(d) Name of Employer or Principal Place of Business		(e) Occupation	
E. (a) Name			
(b) Address (number and street)			
(c) City, State and ZIP Code			
(d) Name of Employer or Principal Place of Business		(e) Occupation	

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Crossroads Media, LLC			Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011		
Mailing Address of Payee 66 Canal Center Plaza Ste. 555			Amount 9801.78		
City	State	Zip Code	Communication Date M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011		
Alexandria	VA	22314			
Name of Employer		Occupation			
Purpose of Disbursement (Including title(s) of communication(s)) TV/Media Placement (Typical)			Transaction ID : F93.4101		
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For: 2012	
Barack H. Obama		Senate	IA	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
		<input checked="" type="checkbox"/> President	District: _____	<input type="checkbox"/> Other (specify) ▶ _____	
Transaction ID : F94.4113					
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
		Senate	_____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		President	District: _____	<input type="checkbox"/> Other (specify) ▶ _____	
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
		Senate	_____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		President	District: _____	<input type="checkbox"/> Other (specify) ▶ _____	
B. Full Name (Last, First, Middle Initial) of Payee Crossroads Media, LLC			Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 09 / 2011		
Mailing Address of Payee 66 Canal Center Plaza Ste. 555			Amount 9801.78		
City	State	Zip Code	Communication Date M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011		
Alexandria	VA	22314			
Name of Employer		Occupation			
Purpose of Disbursement (Including title(s) of communication(s)) TV/Media Placement (Typical)			Transaction ID : F93.4104		
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For: 2012	
Barack H. Obama		Senate	NH	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
		<input checked="" type="checkbox"/> President	District: _____	<input type="checkbox"/> Other (specify) ▶ _____	
Transaction ID : F94.4120					
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
		Senate	_____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		President	District: _____	<input type="checkbox"/> Other (specify) ▶ _____	
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For:	
		Senate	_____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
		President	District: _____	<input type="checkbox"/> Other (specify) ▶ _____	
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶			19603.56		
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)					

SCHEDULE 9-B

Disbursement(s) Made or Obligation(s)

A. Full Name (Last, First, Middle Initial) of Payee Upgrade Films			Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011		
Mailing Address of Payee 3299 K Street, NW Ste. 200			Amount 320.72		
City	State	Zip Code	Communication Date M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011		
Washington	DC	20007			
Name of Employer		Occupation			
Purpose of Disbursement (Including title(s) of communication(s)) TV/Media Production (Typical)			Transaction ID : F93.4106		
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For: 2012	
Barack H. Obama	<input type="checkbox"/>	Senate	IA	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input checked="" type="checkbox"/>	President	District: _____	<input type="checkbox"/> Other (specify) ▶ _____	
Transaction ID : F94.4121					
Name of Federal Candidate	Office Sought:	House	State: _____	Disbursement/Obligation For:	
	<input type="checkbox"/>	Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/>	President		<input type="checkbox"/> Other (specify) ▶ _____	
Name of Federal Candidate	Office Sought:	House	State: _____	Disbursement/Obligation For:	
	<input type="checkbox"/>	Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/>	President		<input type="checkbox"/> Other (specify) ▶ _____	
B. Full Name (Last, First, Middle Initial) of Payee			Date of Disbursement or Obligation M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011		
Upgrade Films			Amount 320.72		
Mailing Address of Payee 3299 K Street, NW Ste. 200			Communication Date M M M / D D D / Y Y Y Y Y Y 12 / 12 / 2011		
City	State	Zip Code			
Washington	DC	20007			
Name of Employer		Occupation			
Purpose of Disbursement (Including title(s) of communication(s)) TV/Media Production (Typical)			Transaction ID : F93.4108		
Name of Federal Candidate	Office Sought:	House	State:	Disbursement/Obligation For: 2012	
Barack H. Obama	<input type="checkbox"/>	Senate	NH	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	
	<input checked="" type="checkbox"/>	President	District: _____	<input type="checkbox"/> Other (specify) ▶ _____	
Transaction ID : F94.4122					
Name of Federal Candidate	Office Sought:	House	State: _____	Disbursement/Obligation For:	
	<input type="checkbox"/>	Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/>	President		<input type="checkbox"/> Other (specify) ▶ _____	
Name of Federal Candidate	Office Sought:	House	State: _____	Disbursement/Obligation For:	
	<input type="checkbox"/>	Senate	District: _____	<input type="checkbox"/> Primary <input type="checkbox"/> General	
	<input type="checkbox"/>	President		<input type="checkbox"/> Other (specify) ▶ _____	
SUBTOTAL of Disbursements/Obligations This Page (optional) ▶			641.44		
TOTAL This Period (last page this line number only) ▶ (carry total from last page to Line 10)			20245.00		