

FEC FORM 9 24 HOUR NOTICE OF DISBURSEMENTS/OBLIGATIONS FOR ELECTIONEERING COMMUNICATIONS

1. Individual, Organization or Qualified Nonprofit Corporation Making the Disbursement/Obligations

(a) Name AMERICAN ENERGY ALLIANCE		2. FEC Identification Number C C30001176
(b) Address (number and street) <input checked="" type="checkbox"/> check if different than previously reported 655 15th Street, NW Suite 825		
(c) City, State and ZIP Code WASHINGTON DC 20005		
(d) Name of Employer or Principal Place of Business		(e) Occupation

3. Is This Statement

New
or
 Amended

4. Covering Period

M M / D D / Y Y Y Y
1 0 / 0 7 / 2 0 0 8
through
M M / D D / Y Y Y Y
1 0 / 1 3 / 2 0 0 8

5. (a) Date of Public Distribution(s) 1 0 / 1 3 / 2 0 0 8 (b) Communication Title Lunsford Tax

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. Were the disbursements for the electioneering communication made exclusively from donations to a segregated bank account? Yes No

8. Custodian of Records

(a) Name Thomas Pyle	
(b) Address (number and street) 655 15th Street, NW	
(c) City, State and ZIP Code Washington DC 20005	
(d) Name of Employer or Principal Place of Business American Energy Alliance	(e) Occupation President

9. Total Donations This Statement

10. Total Disbursements/Obligations This Statement

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM Thomas Pyle

SIGNATURE Electronically Filed by Thomas Pyle DATE 10/14/2008

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 Thomas Pyle	Transaction ID : F91.000001	
	(b) Address (number and street) 655 15th Street, NW Suite 825 Suite 825		
	(c) City, State and Zip Code Washington DC 20005		
	(d) Name of Employer or Principal Place of Business American Energy Alliance	(e) Occupation President	
B.	(a) Name Wayne Gable	Transaction ID : F91.000002	
	(b) Address (number and street) 655 15th Street, NW Suite 825 Suite 825		
	(c) City, State and Zip Code Washington DC 20005		
	(d) Name of Employer or Principal Place of Business Gable Consulting	(e) Occupation President	
C.	(a) Name Lisa Wallace	Transaction ID : F91.000003	
	(b) Address (number and street) 655 15th Street, NW Suite 825 Suite 825		
	(c) City, State and Zip Code Washington DC 20005		
	(d) Name of Employer or Principal Place of Business American Energy Alliance	(e) Occupation Chief Financial Officer	
D.	(a) Name Brian Kennedy	Transaction ID : F91.000004	
	(b) Address (number and street) 655 15th Street, NW Suite 825 Suite 825		
	(c) City, State and Zip Code Washington DC 20005		
	(d) Name of Employer or Principal Place of Business FD Dittus Communications	(e) Occupation VP/Managing Director	

SCHEDULE 9-B

Disbursement(s) Made or Obligations

A. Full Name (Last, First, Middle Initial) of Payee CrossRoads Media LLC <hr/> Mailing Address of Payee 66 Canal Center Plaza Suite 555 <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314</td> </tr> </table> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:60%;">Name of Employer</td> <td style="width:40%;">Occupation</td> </tr> </table>	City	State	Zip Code	Alexandria	VA	22314	Name of Employer	Occupation	Date of Disbursement or Obligation <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 0 7 / 2 0 0 8</td> </tr> </table> Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">125328.00</div> Communication Date <table style="width:100%; border: none;"> <tr> <td style="text-align: center;">M M / D D / Y Y Y Y</td> </tr> <tr> <td style="text-align: center;">1 0 / 1 3 / 2 0 0 8</td> </tr> </table> Transaction ID : F93.000001	M M / D D / Y Y Y Y	1 0 / 0 7 / 2 0 0 8	M M / D D / Y Y Y Y	1 0 / 1 3 / 2 0 0 8
City	State	Zip Code											
Alexandria	VA	22314											
Name of Employer	Occupation												
M M / D D / Y Y Y Y													
1 0 / 0 7 / 2 0 0 8													
M M / D D / Y Y Y Y													
1 0 / 1 3 / 2 0 0 8													

Purpose of Disbursement (including title(s) of communication(s))
 Radio Ad Media Buy - Lunsford Tax

Name of Federal Candidate Bruce Lunsford	Office Sought:	<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: KY	District: _____	Disbursement/Obligation For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
F94.000002					
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____
Name of Federal Candidate	Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: _____	District: _____	Disbursement/Obligation For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

SUBTOTAL of Disbursement/Obligation This Page (optional)	<div style="border: 1px solid black; padding: 2px;">125328.00</div>
TOTAL This Period (last page this line number only) (carry total from last page to line 10)	<div style="border: 1px solid black; padding: 2px;">125328.00</div>