Crossroads Generation 5013 Coachmans Carriage Terrace Glen Allen, VA 23059 RECEIVED 2012 MAY 14 PM 2: 12 FEC MAIL CENTER

May 14, 2012

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

Re: Form 1, Statement of Organization-Unlimited Contributions

To Whom it May Concern:

This committee intends to make independent expenditures and, consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in *SpeechNow v. FEC*, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communication, to federal candidates or committees.

Respectfully submitted,

Margee Crancy

Treasurer

FEC FORM 1

STATEMENT OF ORGANIZATION

RECEIVED -

2012 MAY 14 PM 2: 12

FEC MALL CENTER

NAME OF COMMITTEE (in full)	(Check if name is changed)	Example:If typing, type over the lines.	12FE4M5			
Crossroads Gen	eration					
ADDRESS (number and street)	,5013 Coachmans Carriage T	егтасе				
(Check if address is changed)	Glen Allen		VA 2305	9		
	C	CITY	STATE	ZIP CODE		
COMMITTEE'S E-MAIL ADDRES (Check if address is changed)	SS (Please provide only one e-i	mail address)				
COMMITTEE'S WEB PAGE ADD	• •					
(Check if address is changed)	www.crossroadsgeneration.c	om				
2. DATE 05 11 2012						
3. FEC IDENTIFICATION NU	UMBER C					
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)				
I certify that I have examined th	I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Treasurer Margee Clancy						
Signature of Treasurer	-Giancy N		Date 05	14 2012		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.						
Office Use Only		For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100	on 🔽	EC FORM 1 (Revised 02/2009)		

5.

		COMMITTEE e Committee:					
(a)		This committee is a principal campaign committee. (Complete the candidate information below.)					
(b)	•	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name o Candida							
Candida Party Af		Office State ion Sought: House Senate President District					
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name o Candida							
Party	Con	nmittee:					
(d)		(National, State (Democratic, This committee is a or subordinate) committee of the Republican, etc.) Party.					
Politic	al A	action Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a					
		Corporation w/o Capital Stock Labor Organization					
		Membership Organization Trane Association Cooperative					
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)	×	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
		In addition, this committee is a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint F	unc	draising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.					
(Com	nmittees Participating in Joint Fundraiser					
1	1.	FEC ID number C					
2	2.	FEC ID number C					
3	3.	FEC ID number C					
	A	I					

Write or Type Committee Name			
Crossroads Ger	neration		
6. Name of Any Connected O	rganization, Affiliated Committee, Joint F	undraising Representat	tive, or Leadership PAC Sponsor
NONE			<u> </u>
			<u> </u>
Mailing Address			
]
	CITY	STAT	E ZIP CODE
Relationship: Connected	Organization Affiliated Committee	Joint Fundraising Repres	entative Leadership PAC Sponsor
 Custodian of Records: Identification books and records. 	ify by name, address (phone number op	tional) and position of th	e person in possession of committee
Margee Cla	incy		
Full Name	5013 Coachmans Carriage Terrace	 	, , , , , , , , , , , , , , , , , , ,
Walling Facious			
	Glen Allen	VA.	23059
Title or Position	CITY	STATE	ZIP CODE
Treasurer		Telephone number	703 - 989 - 6167
8. Treasurer: List the name and any designated agent (e.g., a	address (phone number optional) of the ssistant treasurer).	treasurer of the commit	tee; and the name and address of
Full Name Margee Cla	ncy		
Mailing Address	5013 Coachmans Carriage Terrace		
	<u> </u>		
	Glen Allen CITY	VA STATE	ZIP CODE
Title or Position Treasurer		Telephone number	703 - 989 - 6167

FEC FOII	n 1 (Revised 02/2009)	Page 4
Full Name of Designated		
Agent		
Mailing Address		
	CITY STATE	ZIP CODE
Title or Position		
	Telephone number	
	Depositories: List all banks or other depositories in which the committee depo oxes or maintains funds. Depository, etc.	ssits funds, holds accounts, rents
safety deposit be	oxes or maintains funds.	
safety deposit b Name of Bank,	poxes or maintains funds. Depository, etc. PNC Bank 800 17th Street, NW	
safety deposit b Name of Bank,	PNC Bank 800 17th Street, NW Washington CITY STATE	
safety deposit be Name of Bank, Mailing Address	PNC Bank 800 17th Street, NW Washington CITY STATE	
safety deposit be Name of Bank, Mailing Address	PNC Bank 800 17th Street, NW Washington CITY STATE	
safety deposit be Name of Bank, Mailing Address	PNC Bank 800 17th Street, NW Washington CITY STATE	
safety deposit be Name of Bank, Mailing Address	PNC Bank 800 17th Street, NW Washington CITY STATE	

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING The FEC added this page to the end of this filing to indicate	
	Date of Receipt
Hand Delivered	5/14/12
USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirm	mation™ Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	-
Overnight Delivery Service (Specify):	Shipping Date
Next Busines	s Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Other (Specify):	eceipt or Postmarked
n	5/4/12
PREPARER (2/2005)	DATE PREPARED
(3/2005)	