

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. 12FE4M5

Crossroads Generation

ADDRESS (number and street) 11972 Grey Oaks Park Rd.

Check if different than previously reported. (ACC) Glen Allen VA 23059

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00521146

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:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on [MM] / [DD] / [YYYY] in the State of []

- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] 07 / 01 / 2012 through [MM] / [DD] / [YYYY] 09 / 30 / 2012

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 Margee Clancy

Signature of Treasurer Margee Clancy [Electronically Filed] Date 10 / 15 / 2012

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

Office Use Only									
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Crossroads Generation

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="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="546800.02"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="205098.00"/>	<input type="text" value="955098.00"/>
(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="751898.02"/>	<input type="text" value="955098.00"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="424332.70"/>	<input type="text" value="627532.68"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="327565.32"/>	<input type="text" value="327565.32"/>
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

Crossroads Generation

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2012 To: M M / D D / Y Y Y Y 09 / 30 / 2012

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).....	155000.00	755000.00
(ii) Unitemized	98.00	98.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	155098.00	755098.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	50000.00	200000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	205098.00	955098.00
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).....	0.00	0.00
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))..... ▶	205098.00	955098.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	205098.00	955098.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	390882.70	550082.68
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	390882.70	550082.68
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)	33450.00	77450.00
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)) ..	424332.70	627532.68
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	424332.70	627532.68

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)	205098.00	955098.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	205098.00	955098.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	390882.70	550082.68
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	390882.70	550082.68

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

Unless otherwise noted, none of the expenditures reported are allocable to a candidate

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: PAGE 7 OF 24
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Crossroads Generation

Full Name (Last, First, Middle Initial)
A. John Owen
 Mailing Address 1762 W. 20th S. Unit 10
 City State Zip Code
 Lindon UT 84042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 ThermoWorks, Inc. Business Owner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 25 / 2012
Transaction ID : SA11AI.4221
 Amount of Each Receipt this Period
 5000.00
 Contribution

Full Name (Last, First, Middle Initial)
B. Republican State Leadership Committee
 Mailing Address 1201 F Street, NW
 Suite 675
 City State Zip Code
 Washington DC 20004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 09 / 19 / 2012
Transaction ID : SA11AI.4219
 Amount of Each Receipt this Period
 150000.00
 Contribution

Full Name (Last, First, Middle Initial)
C.
 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 / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 155000.00
TOTAL This Period (last page this line number only)..... ▶ 155000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 OF 24
(check only one)

<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)
Crossroads Generation

A. AMERICAN CROSSROADS

Full Name (Last, First, Middle Initial)
Mailing Address 1401 NEW YORK AVENUE NW
SUITE 1200

City WASHINGTON State DC Zip Code 20005

FEC ID number of contributing federal political committee. **C** C00487363

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200000.00

Date of Receipt 09 / 17 / 2012
Transaction ID : SA11C.4220

Amount of Each Receipt this Period 50000.00

Contribution

B.

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

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ▶ 50000.00

TOTAL This Period (last page this line number only)..... ▶ 50000.00

**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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Crossroads Media

Mailing Address 66 Canal Ctr. Plaza
Suite 555

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
TV media placement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2012

Transaction ID : SB21B.4231

Amount of Each Disbursement this Period

6836.00

Full Name (Last, First, Middle Initial)

B. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Consulting, social media and website

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 03 / 2012

Transaction ID : SB21B.4161

Amount of Each Disbursement this Period

8000.00

Full Name (Last, First, Middle Initial)

C. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Consulting, social media and website

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2012

Transaction ID : SB21B.4181

Amount of Each Disbursement this Period

9120.00

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

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

23956.00

**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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Website development

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2012

Transaction ID : SB21B.4183

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Mobile advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2012

Transaction ID : SB21B.4184

Amount of Each Disbursement this Period

2300.00

Full Name (Last, First, Middle Initial)

C. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Online advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
08 / 15 / 2012

Transaction ID : SB21B.4186

Amount of Each Disbursement this Period

34000.00

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

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

38300.00

**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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Online advertising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2012

Transaction ID : SB21B.4190

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Consulting, social media and website

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2012

Transaction ID : SB21B.4206

Amount of Each Disbursement this Period

12000.00

Full Name (Last, First, Middle Initial)

C. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Online advertising deposit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 05 / 2012

Transaction ID : SB21B.4210

Amount of Each Disbursement this Period

107366.30

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

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

120866.30

**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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Website development

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4193

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Engage

Mailing Address 725 8th Street, SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Online advertising deposit

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4209

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Derek Flowers

Mailing Address 1331 University Ave., #210

City Waukee State IA Zip Code 50263

Purpose of Disbursement
Consulting, strategic and communications

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4170

Amount of Each Disbursement this Period

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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Derek Flowers

Mailing Address 1331 University Ave., #210

City Waukeee State IA Zip Code 50263

Purpose of Disbursement
Consulting, strategic and communications

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2012

Transaction ID : SB21B.4191

Amount of Each Disbursement this Period

11250.00

Full Name (Last, First, Middle Initial)

B. Derek Flowers

Mailing Address 1331 University Ave., #210

City Waukeee State IA Zip Code 50263

Purpose of Disbursement
Travel reimbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		05		2012

Transaction ID : SB21B.4192

Amount of Each Disbursement this Period

3564.22

Full Name (Last, First, Middle Initial)

C. Derek Flowers

Mailing Address 1331 University Ave., #210

City Waukeee State IA Zip Code 50263

Purpose of Disbursement
Consulting, strategic and communications

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		17		2012

Transaction ID : SB21B.4198

Amount of Each Disbursement this Period

11250.00

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

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

26064.22

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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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Guestbooker.com LLC

Mailing Address 1204 Vintage Grove Lane

City Franklin State TN Zip Code 37064

Purpose of Disbursement
Consulting, media engagement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4159

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Guestbooker.com LLC

Mailing Address 1204 Vintage Grove Lane

City Franklin State TN Zip Code 37064

Purpose of Disbursement
Consulting, media engagement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4172

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Guestbooker.com LLC

Mailing Address 1204 Vintage Grove Lane

City Franklin State TN Zip Code 37064

Purpose of Disbursement
Consulting, media engagement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4197

Amount of Each Disbursement this Period

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

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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. iContribute

Mailing Address 725 8th Street SE

City Washington State DC Zip Code 20003

Purpose of Disbursement
Website contribution processing

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2012

Transaction ID : SB21B.4227

Amount of Each Disbursement this Period

254.90

Full Name (Last, First, Middle Initial)

B. Madison McQueen LLC

Mailing Address 135 Richmond Street

City El Segundo State CA Zip Code 90245

Purpose of Disbursement
Video production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2012

Transaction ID : SB21B.4188

Amount of Each Disbursement this Period

16000.00

Full Name (Last, First, Middle Initial)

C. Madison McQueen LLC

Mailing Address 135 Richmond Street

City El Segundo State CA Zip Code 90245

Purpose of Disbursement
Video production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : SB21B.4194

Amount of Each Disbursement this Period

4876.00

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

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

21130.90

**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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Madison McQueen LLC

Mailing Address 135 Richmond Street

City State Zip Code
El Segundo CA 90245

Purpose of Disbursement
Video production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 07 / 2012

Transaction ID : SB21B.4195

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. MDC & Associates, Inc.

Mailing Address 11972 Grey Oaks Park Road

City State Zip Code
Glen Allen VA 23059

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
07 / 20 / 2012

Transaction ID : SB21B.4171

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. MDC & Associates, Inc.

Mailing Address 11972 Grey Oaks Park Road

City State Zip Code
Glen Allen VA 23059

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
09 / 05 / 2012

Transaction ID : SB21B.4208

Amount of Each Disbursement this Period

1500.00

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

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

6000.00

**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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. MDC & Associates, Inc.

Mailing Address 11972 Grey Oaks Park Road

City State Zip Code
Glen Allen VA 23059

Purpose of Disbursement
Bookkeeping & compliance

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4199

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. PNC Bank

Mailing Address 800 17th Street, NW

City State Zip Code
Washington DC 20006

Purpose of Disbursement
Bank fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4228

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. PNC Bank

Mailing Address 800 17th Street, NW

City State Zip Code
Washington DC 20006

Purpose of Disbursement
Bank fee

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4229

Amount of Each Disbursement this Period

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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address 800 17th Street, NW

City Washington State DC Zip Code 20006

Purpose of Disbursement
Bank fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2012

Transaction ID : SB21B.4230

Amount of Each Disbursement this Period

175.95

Full Name (Last, First, Middle Initial)

B. Real Good Technologies

Mailing Address PO Box 41616

City Austin State TX Zip Code 78704

Purpose of Disbursement
SMS services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2012

Transaction ID : SB21B.4173

Amount of Each Disbursement this Period

1000.06

Full Name (Last, First, Middle Initial)

C. Real Good Technologies

Mailing Address PO Box 41616

City Austin State TX Zip Code 78704

Purpose of Disbursement
SMS services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
08 / 08 / 2012

Transaction ID : SB21B.4174

Amount of Each Disbursement this Period

1000.32

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

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

2176.33

**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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Real Good Technologies

Mailing Address PO Box 41616

City Austin State TX Zip Code 78704

Purpose of Disbursement
SMS services

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 17 / 2012

Transaction ID : SB21B.4196

Amount of Each Disbursement this Period

1007.28

Full Name (Last, First, Middle Initial)

B. Richard Sales Media

Mailing Address 9010 S. 10th St.

City Phoenix State AZ Zip Code 85042

Purpose of Disbursement
Video production

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 12 / 2012

Transaction ID : SB21B.4164

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. The Winston Group, Ltd.

Mailing Address 101 Constitution Ave., NW
Suite 710E

City Washington State DC Zip Code 20001

Purpose of Disbursement
Consulting, communications advisory

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2012

Transaction ID : SB21B.4169

Amount of Each Disbursement this Period

4000.00

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

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

9007.28

**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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. The Winston Group, Ltd.

Mailing Address 101 Constitution Ave., NW
Suite 710E

City Washington State DC Zip Code 20001

Purpose of Disbursement
Consulting, communications advisory

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4207

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. The Winston Group, Ltd.

Mailing Address 101 Constitution Ave., NW
Suite 710E

City Washington State DC Zip Code 20001

Purpose of Disbursement
Online survey

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4238

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. The Winston Group, Ltd.

Mailing Address 101 Constitution Ave., NW
Suite 710E

City Washington State DC Zip Code 20001

Purpose of Disbursement
Consulting, communications advisory

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4239

Amount of Each Disbursement this Period

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)
Crossroads Generation

Full Name (Last, First, Middle Initial)

A. Tour de Force Group

Mailing Address 5434 Chieftain Circle

City Alexandria State VA Zip Code 22312

Purpose of Disbursement
Consulting, fundraising

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2012

Transaction ID : SB21B.4201

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. TV Eyes, Inc.

Mailing Address 2150 Post Road

City Fairfield State CT Zip Code 06824

Purpose of Disbursement
Monitoring service

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 20 / 2012

Transaction ID : SB21B.4166

Amount of Each Disbursement this Period

2000.00

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

7000.00

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

390721.66

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Crossroads Generation	FEC IDENTIFICATION NUMBER ▼ C C00521146
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee Campaign Headquarters		Date M M M / D D D / Y Y Y Y Y Y 09 / 21 / 2012
Mailing Address 700 East Pleasant Street PO Box 257		Amount 11450.00
City Brooklyn	State IA	Zip Code 52211
Purpose of Expenditure Phone calls	Category/ Type 	Transaction ID : SE.4241
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 5 5 65950.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee Engage		Date M M M / D D D / Y Y Y Y Y Y 07 / 10 / 2012
Mailing Address 725 8th Street, SE		Amount 1500.00
City Washington	State DC	Zip Code 20003
Purpose of Expenditure Online advertising	Category/ Type 	Transaction ID : SE.4150
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 5 5 45500.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12950.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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.

Margee Clancy

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Crossroads Generation	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00521146 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee Engage	Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 09 / 28 / 2012 </div>
Mailing Address 725 8th Street, SE	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 11500.00 </div>
City State Zip Code Washington DC 20003	Transaction ID : SE.4180
Purpose of Expenditure Mobile advertising	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 77450.00 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Madison McQueen LLC	Date <div style="border: 1px solid black; padding: 2px;"> MM / DD / YYYY 09 / 07 / 2012 </div>
Mailing Address 135 Richmond Street	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 3000.00 </div>
City State Zip Code El Segundo CA 90245	Transaction ID : SE.4156
Purpose of Expenditure Web video production	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: 00 <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 54500.00 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 14500.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> _____ </div>

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.

Margee Clancy

 Signature

[Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Crossroads Generation		FEC IDENTIFICATION NUMBER C C00521146
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee Richard Sales Media		Date MM / DD / YYYY 07 / 10 / 2012
Mailing Address 9010 S. 10th St.		Amount 6000.00
City Phoenix	State AZ	
Purpose of Expenditure Video production		Transaction ID : SE.4152
Category/Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		State: _____ District: 00
Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
Calendar Year-To-Date Per Election for Office Sought 51500.00		<input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		MM / DD / YYYY
City	State	Zip Code
Purpose of Expenditure		Amount
Category/Type		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		State: _____ District: _____
Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General
Calendar Year-To-Date Per Election for Office Sought		<input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	6000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	33450.00

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.

Date MM / DD / YYYY
10 / 15 / 2012

Margee Clancy
Signature

[Electronically Filed]