

**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

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 C00000000

3. Is This Statement

New

or

Amended

4. Covering Period

M M / D D / Y Y Y Y
0 8 / 1 8 / 2 0 1 0

through

M M / D D / Y Y Y Y
0 9 / 0 9 / 2 0 1 0

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

M M / D D / Y Y Y Y
0 9 / 0 3 / 2 0 1 0

(b) Communication Title Health

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

Margee Clancy

(b) Address (number and street)

1701 Esquire Lane

(c) City, State and ZIP Code

McLean VA 22101

(d) Name of Employer or Principal Place of Business

MDC & Associates, Inc.

(e) Occupation

Owner

9. Total Donations This Statement

.00

10. Total Disbursements/Obligations This Statement

390197.00

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

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

Margee Clancy

SIGNATURE Electronically Filed by Margee Clancy

DATE 09/03/2010

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

10030420949

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

11. Person(s) Sharing/Exercising Control

A.	(a) Name Steven Law	Transaction ID : F91.000001
	(b) Address (number and street) 1401 New York Avenue, NW Ste. 1200 Ste. 1200	
	(c) City, State and Zip Code Washington DC 20005	
	(d) Name of Employer or Principal Place of Business Crossroads Grassroots Policy Strategie	(e) Occupation Executive Director

10030420950

SCHEDULE 9-B
Disbursement(s) Made or Obligations

10030420951

A. Full Name (Last, First, Middle Initial) of Payee Crossroads Media, LLC					Date of Disbursement or Obligation M M / D D / Y Y Y Y 08 18 2010					
Mailing Address of Payee 66 Canal Center Plaza Ste. 555					Amount 375276.00					
City Alexandria		State VA		Zip Code 22314		Communication Date M M / D D / Y Y Y Y 09 03 2010				
Name of Employer					Occupation					
Purpose of Disbursement (including title(s) of communication(s)) TV/Media Placement										
Name of Federal Candidate Robin Camahan			Office Sought: X Senate		House President		State: MO		Disbursement/Obligation For: 2010 Primary X General	
F94.000002									Other (specify) _____	
Name of Federal Candidate			Office Sought:		House Senate President		State: District:		Disbursement/Obligation For: Primary General Other (specify) _____	
Name of Federal Candidate			Office Sought:		House Senate President		State: District:		Disbursement/Obligation For: Primary General Other (specify) _____	
B. Full Name (Last, First, Middle Initial) of Payee McCarthy Marcus Hennings, Ltd.					Date of Disbursement or Obligation M M / D D / Y Y Y Y 09 02 2010					
Mailing Address of Payee 1850 M Street, NW Ste. 235					Amount 14921.00					
City Washington		State DC		Zip Code 20036		Communication Date M M / D D / Y Y Y Y 09 03 2010				
Name of Employer					Occupation					
Purpose of Disbursement (including title(s) of communication(s)) TV/Media Production										
Name of Federal Candidate Robin Camahan			Office Sought: X Senate		House President		State: MO		Disbursement/Obligation For: 2010 Primary X General	
F94.000004									Other (specify) _____	
Name of Federal Candidate			Office Sought:		House Senate President		State: District:		Disbursement/Obligation For: Primary General Other (specify) _____	
Name of Federal Candidate			Office Sought:		House Senate President		State: District:		Disbursement/Obligation For: Primary General Other (specify) _____	
SUBTOTAL of Disbursement/Obligation This Page (optional)					390197.00					
TOTAL This Period (last page this line number only) (carry total from last page to line 10)					390197.00					

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input checked="" type="checkbox"/> Other (Specify): <i>Web Form # 494</i>	Date of Receipt or Postmarked <i>9/3/10</i>

Chad
 PREPARER

9/7/10
 DATE PREPARED

10030420952