

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
American Crossroads

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		0.00
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	7162077.02									
(c) Total Receipts (from Line 19)	6902963.00	14837637.52								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14065040.02	14837637.52								
7. Total Disbursements (from Line 31)	7837788.02	8610385.52								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6227252.00	6227252.00								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	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**

Write or Type Committee Name
American Crossroads

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	1	0

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)	6817447.00	14748486.52
(ii) Unitemized	11766.00	15401.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	6829213.00	14763887.52
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	6829213.00	14763887.52
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)	73750.00	73750.00
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 Transfer (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))	6902963.00	14837637.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	6902963.00	14837637.52

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared 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.....	931585.86	1249841.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	931585.86	1249841.56
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 Expenditure (use Schedule E)	6056202.16	6510543.96
25. Coordinated Expenditures Made by Party Committees (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.....	850000.00	850000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	7837788.02	8610385.52
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7837788.02	8610385.52

DETAILED SUMMARY PAGE
of Disbursements

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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)	6829213.00	14763887.52
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	6829213.00	14763887.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	931585.86	1249841.56
37. Offsets to Operating Expenditures (from Line 15, page 3)	73750.00	73750.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	857835.86	1176091.56

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 107
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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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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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
RICHARD ADAMS

Mailing Address 9 CYPRESS PT.CT.

City State Zip Code
FRISCO TX 75034-6826

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2010

Transaction ID: SA11.505

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
KEN ALTSCHULD

Mailing Address 5870 GRANITE WAY

City State Zip Code
CASTLE ROCK CO 80108-7529

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

Name of Employer Occupation
SELF GEOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 20 / 2010

Transaction ID: SA11.479

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROBERT BEEBY

Mailing Address 77 BEACHSIDE AVE BOX 146

City State Zip Code
GREENS FARMS CT 06838

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2010

Transaction ID: SA11.499

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) STEPHEN BENZIAN	Date of Receipt MM / DD / YYYY 09 / 21 / 2010
	Mailing Address 2426 OAKDALE RD	Transaction ID: SA11.458
	City State Zip Code HILLSBOROUGH CA 94010-6143	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) THOMAS BOONE	Date of Receipt MM / DD / YYYY 09 / 22 / 2010
	Mailing Address 4163 OAK PLACE DRIVE	Transaction ID: SA11.453
	City State Zip Code WESTLAKE VILLAGE CA 91362-5129	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

C.	Full Name (Last, First, Middle Initial) STEPHEN BRAUER	Date of Receipt MM / DD / YYYY 09 / 08 / 2010
	Mailing Address 11250 HUNTER DRIVE	Transaction ID: SA11.329
	City State Zip Code BRIDGETON MO 63044-2306	Amount of Each Receipt this Period 10000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation HUNTER ENGINEERING COMPANY PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

SUBTOTAL of Receipts This Page (optional)	▶	11250.00
TOTAL This Period (last page this line number only)	▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) RICHARD BROWN	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 106 WOOD TRAIL	Transaction ID: SA11.355
	City State Zip Code WEST LAKE HILLS TX 78746-5241	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer SELF	Occupation CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

B.	Full Name (Last, First, Middle Initial) WILLIAM H. BROWNE	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 350 PARK AVENUE 9TH FLOOR	Transaction ID: SA11.307
	City State Zip Code NEW YORK NY 10022-6022	Amount of Each Receipt this Period 5000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer TWEEDY BROWNE & CO.	Occupation PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C.	Full Name (Last, First, Middle Initial) WILLIAM BURCHENAL	Date of Receipt MM / DD / YYYY 09 / 20 / 2010
	Mailing Address 10533 BIG CANOE	Transaction ID: SA11.478
	City State Zip Code BIG CANOE GA 30143-5127	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer CEE BEE'S CITRUS	Occupation CITRUS GROWER & PACKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	7900.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 9 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
DOUGLAS CARPER

Mailing Address 2140 WOODSDALE BLVD.

City State Zip Code
LINCOLN NE 68502-4946

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

Name of Employer Occupation
DEC CAPITAL, INC. INVESTOR

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 18 / 2010

Transaction ID: SA11.516

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CAROL CHAPMAN

Mailing Address 10666 MANITOU PARK BOULEVARD

City State Zip Code
BAINBRIDGE ISLAND WA 98110-3375

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2010

Transaction ID: SA11.316

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SHERMAN CHESSLER

Mailing Address 9326 SHOSHONE AVE

City State Zip Code
NORTHRIDGE CA 91325-2327

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: SA11.385

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 107
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
GEORGE W. CLAY

Mailing Address 2130 PALMER AVENUE

City State Zip Code
NEW ORLEANS LA 70118-6242

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

Name of Employer INFORMATION REQUESTED PER BEST EFFORTS
Occupation INFORMATION REQUESTED PER BEST EFFORTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 28 / 2010

Transaction ID: SA11.288

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
SAMUEL COLE

Mailing Address 28 MELROSE PLACE

City State Zip Code
MONTCLAIR NJ 07042-2523

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

Name of Employer SELF
Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2010

Transaction ID: SA11.524

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
DAVID CONTIS

Mailing Address 2 N RIVERSIDE PLAZA

City State Zip Code
CHICAGO IL 60606-2600

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

Name of Employer EQUITY GROUP INVESTMENTS
Occupation PRESIDENT - REAL ESTATE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: SA11.367

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3150.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 11 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
WILLIAM COUGHRAN

Mailing Address 820 ARROYO CT

City PALO ALTO State CA Zip Code 94306-3734

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

Name of Employer GOOGLE Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2010

Transaction ID: SA11.488

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MARTIN COYLE

Mailing Address P.O. BOX 1425

City SONOMA State CA Zip Code 95476-1425

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2010

Transaction ID: SA11.418

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN CRISAN

Mailing Address 2 BREEZE KNOLL

City WESTFIELD State NJ Zip Code 07090-2910

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

Name of Employer HEALTHCARE CO. Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 24 / 2010

Transaction ID: SA11.445

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1750.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) LARRY DARKEN	Date of Receipt MM / DD / YYYY 09 / 24 / 2010
	Mailing Address 10452 RATHER ROAD	Transaction ID: SA11.248
	City State Zip Code KNOXVILLE TN 37931-2125	Amount of Each Receipt this Period 750.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer INFORMATION REQUESTED PER BEST EFFORTS Occupation INFORMATION REQUESTED PER BEST EFFORTS		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00

B.	Full Name (Last, First, Middle Initial) SHARON J. DAVIS	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 3334 WOODHILL CIRCLE	Transaction ID: SA11.308
	City State Zip Code YPSILANTI MI 48198-9650	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer Homemaker Occupation Homemaker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00

C.	Full Name (Last, First, Middle Initial) FRANK DELFER	Date of Receipt MM / DD / YYYY 09 / 09 / 2010
	Mailing Address 5180 STIRLING ST	Transaction ID: SA11.328
	City State Zip Code GRANITE BAY CA 95746-6150	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
Name of Employer DST OUTPUT Occupation EXECUTIVE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00

SUBTOTAL of Receipts This Page (optional)	1500.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 13 / 107
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) ROGER A. DORF	Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2010
	Mailing Address 13226 SHORE VISTA DRIVE	Transaction ID: SA11.229
	City State Zip Code AUSTIN TX 78732-1608	Amount of Each Receipt this Period 15000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation AIRWALK COMMUNICATIONS EXECUTIVE CHAIRMAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	

B.	Full Name (Last, First, Middle Initial) PAUL N. DOUTHAT	Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2010
	Mailing Address 5839 BROOKBANK LANE	Transaction ID: SA11.287
	City State Zip Code SHAWNEE MISSION KS 66208-1118	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation ALPHA GRAPHICS BUSINESS OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) BRENDA DUFF	Date of Receipt M M / D D / Y Y Y Y Y 09 / 23 / 2010
	Mailing Address P.O. BOX 305	Transaction ID: SA11.448
	City State Zip Code CHAVIES KY 41727-0305	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation PINE BRANCH COAL SALES, INC COAL MINING	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	17650.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 14 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
THOMAS ELBRING

Mailing Address 4462 S COLE ST

City MORRISON State CO Zip Code 80465-1138

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

Name of Employer LOCKHEED MARTIN Occupation ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 27 / 2010
Transaction ID: SA11.401
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RAMSAY ELDER

Mailing Address 2817 TANGLEY RD

City HOUSTON State TX Zip Code 77005-2351

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

Name of Employer SELF Occupation ACCOUNTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 19 / 2010
Transaction ID: SA11.486
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
NANCY ELKAN

Mailing Address 3731 SHADE TREE

City PORTAGE State MI Zip Code 49024-1036

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 777.00

Date of Receipt: 09 / 04 / 2010
Transaction ID: SA11.346
Amount of Each Receipt this Period: 195.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 945.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 / 107
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) NANCY ELKAN		Date of Receipt
	Mailing Address 3731 SHADE TREE		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PORTAGE	MI	49024-1036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.383
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="193.00"/>
		<input type="text" value="777.00"/>	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) NANCY ELKAN		Date of Receipt
	Mailing Address 3731 SHADE TREE		<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PORTAGE	MI	49024-1036
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.521
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="194.00"/>
		<input type="text" value="777.00"/>	CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) DON ELLIOTT		Date of Receipt
	Mailing Address 104 GRIST MILL TERRACE		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	SPARTANBURG	SC	29307-1783
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.343
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
		<input type="text" value="250.00"/>	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="637.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 16 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JEFFREY FOUTCH

Mailing Address 3215 ELLA LEE LANE

City HOUSTON State TX Zip Code 77019-5923

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

Name of Employer PEREGRINE MIDSTREAM PARTNERS Occupation MANAGING DIRECTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 19 / 2010

Transaction ID: SA11.485

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GEORGE FRANCISCO

Mailing Address 42 W BROAD OAKS

City HOUSTON State TX Zip Code 77056-1204

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

Name of Employer M3MIDSTREAM LLC Occupation EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 26 / 2010

Transaction ID: SA11.406

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID FRISCHKORN

Mailing Address 3615 PIPING ROCK

City HOUSTON State TX Zip Code 77027-4116

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

Name of Employer DAHLMAN ROSE Occupation INVESTMENT BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2010

Transaction ID: SA11.530

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2000.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 17 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
BRUCE GHRIST

Mailing Address 2805 UNIVERSITY TER NW

City State Zip Code
WASHINGTON DC 20016-3458

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

Name of Employer Occupation
ROSETTA STONE LTD. ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 13 / 2010

Transaction ID: SA11.315

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD BAXTER GILLIAM

Mailing Address P.O. BOX 820

City State Zip Code
KESWICK VA 22947-0820

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

Name of Employer Occupation
CUMBERLAND RESOURCES FOUNDER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 16 / 2010

Transaction ID: SA11.233

Amount of Each Receipt this Period
100000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID GOLDFARB

Mailing Address 3108 EAST WOODLAND DRIVE

City State Zip Code
PORT HURON MI 48060-1932

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

Name of Employer Occupation
PROFESSIONAL RETAIL INFORMATION SYSTEM CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 07 / 2010

Transaction ID: SA11.338

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **102250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
BRUCE GORCHOW

Mailing Address 505 N LAKE SHORE DRIVE
6007

City State Zip Code
CHICAGO IL 60611-3427

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

Name of Employer Occupation
PPM AMERICA INVESTMENTS

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: SA11.439

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JERRY GRUNDHOFER

Mailing Address 9811 WEST CHARLESTON BLVD
SUITE 2-163

City State Zip Code
LAS VEGAS NV 89117-7528

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: SA11.431

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MEGAN HADDOX

Mailing Address 3829 CRISWELL DR.

City State Zip Code
UPPER ARLINGTON OH 43220-4934

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: SA11.381

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3900.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
RICHARD HAMNER

Mailing Address 38 MUIRFIELD WAY

City State Zip Code
SUGAR LAND TX 77479-2963

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

Name of Employer Occupation
MEDICAL PROPERTIES TRUST, INC. EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 24 / 2010

Transaction ID: SA11.432

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROBERT HANNAN

Mailing Address 12340 SW 60TH CT

City State Zip Code
PINECREST FL 33156-5652

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

Name of Employer Occupation
MIAMI CHILDRENS HOSPITAL PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 20 / 2010

Transaction ID: SA11.482

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DALE HANSON

Mailing Address P.O. BOX 1549

City State Zip Code
SANIBEL FL 33957-1549

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 27 / 2010

Transaction ID: SA11.400

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 20 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
AL G. HILL, JR.
 Mailing Address 1601 ELM STREET
STE. 5000
 City DALLAS State TX Zip Code 75201-4738
 Date of Receipt 09 / 13 / 2010
Transaction ID: SA11.223
 Amount of Each Receipt this Period 100000.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer A.G. HILL PARTNERS Occupation PARTNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

B. Full Name (Last, First, Middle Initial)
BILL HILL
 Mailing Address 3520 MCFARLIN
 City DALLAS State TX Zip Code 75205-1830
 Date of Receipt 09 / 20 / 2010
Transaction ID: SA11.480
 Amount of Each Receipt this Period 1000.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

C. Full Name (Last, First, Middle Initial)
DWIGHT HOLM
 Mailing Address 749 MARSOLAN AVE
 City SOLANA BEACH State CA Zip Code 92075-1932
 Date of Receipt 09 / 08 / 2010
Transaction ID: SA11.331
 Amount of Each Receipt this Period 100.00
CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

SUBTOTAL of Receipts This Page (optional) ► 101100.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 21 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
DWIGHT HOLM

Mailing Address 749 MARSOLAN AVE

City State Zip Code
SOLANA BEACH CA 92075-1932

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: SA11.430

Amount of Each Receipt this Period
150.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCOTT HOPKINS

Mailing Address 140 WILLIAMSBURG LANE

City State Zip Code
FORT WORTH TX 76107-1738

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

Name of Employer Occupation
PINNACLE ANESTHESIA CONSU- LTANTS PARTNER, DOCTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 30 / 2010

Transaction ID: SA11.356

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT HOTCHKISS

Mailing Address 523 E 72

City State Zip Code
NEW YORK NY 10021-4099

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: SA11.433

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1150.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 107
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input 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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) JAMES R. HOUSTON		Date of Receipt
	Mailing Address 345 N VIA PALMAS		<input type="text" value="09"/> / <input type="text" value="07"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	PALM SPRINGS	CA	92262
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.220
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000.00"/>
			CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) B. WAYNE HUGHES		Date of Receipt
	Mailing Address 884 IRON WORKS PIKE		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	LEXINGTON	KY	40511-9410
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.228
Name of Employer Public Storage Inc.		Occupation Chairman	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="1000000.00"/>
			CONTRIBUTION

C.	Full Name (Last, First, Middle Initial) WALLACE E. HULL		Date of Receipt
	Mailing Address 24877 ELDORADO MEADOW ROAD		<input type="text" value="09"/> / <input type="text" value="23"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	HIDDEN HILLS	CA	91302-1213
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11.239
Name of Employer RETIRED		Occupation RETIRED	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="2000.00"/>
			CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="1003000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 23 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
CARY KATZ

Mailing Address 9021 GROVE CREST LN

City State Zip Code
LAS VEGAS NV 89134-0522

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

Name of Employer Occupation
COLLEGE LOAN CORPORATION CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt
MM / DD / YYYY
09 / 22 / 2010

Transaction ID: SA11.238

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN KEEFE

Mailing Address 4421 WARREN ST. NW

City State Zip Code
WASHINGTON DC 20016-2439

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

Name of Employer Occupation
ABRAXAS CORP CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: SA11.366

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS KELLY

Mailing Address 197 34TH AVE E

City State Zip Code
SEATTLE WA 98112-4913

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

Name of Employer Occupation
K&L GATES ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2010

Transaction ID: SA11.495

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 20500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 24 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
ROBERT E. KELSO
Mailing Address 640 IVY LANE
City SAN ANTONIO State TX Zip Code 78209-2827
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 100000.00
Date of Receipt 09 / 13 / 2010
Transaction ID: SA11.224
Amount of Each Receipt this Period 100000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
ROGER KLEIN
Mailing Address 63 BEETHOVEN AVE
City NEWTON State MA Zip Code 02468-1732
FEC ID number of contributing federal political committee. **C**
Name of Employer TREND SOFTWARE Occupation ATTORNEY
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 20 / 2010
Transaction ID: SA11.464
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
STEVEN KRAEMER
Mailing Address 9 CROWS NEST ROAD
City BRONXVILLE State NY Zip Code 10708-4801
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF EMPLOYED Occupation INVESTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 225.00
Date of Receipt 09 / 15 / 2010
Transaction ID: SA11.558
Amount of Each Receipt this Period 225.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 100475.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 25 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
KENNETH KRAMER

Mailing Address 1011 CATTELL ST

City EASTON State PA Zip Code 18042-1572

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

Name of Employer EPIC RADIOLOGY Occupation RADIOLOGIST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 26 / 2010

Transaction ID: SA11.416

Amount of Each Receipt this Period 250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD KURTZ

Mailing Address 1 WINDWARD WAY

City CAPE ELIZABETH State ME Zip Code 04107-1500

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2010

Transaction ID: SA11.411

Amount of Each Receipt this Period 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS LACO

Mailing Address 8606 CYPRESS LAKES DRIVE

City RALEIGH State NC Zip Code 27615-2116

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 13 / 2010

Transaction ID: SA11.226

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 5750.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 26 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
SUSAN LAPHAM

Mailing Address 2418 MARATHON LANE

City State Zip Code
FT. LAUDERDALE FL 33312-4610

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

Name of Employer Occupation
SELF HEALTH CARE WORKER

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 18 / 2010

Transaction ID: SA11.502

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
RICHARD LARREY

Mailing Address 2801 JARRARD ST.

City State Zip Code
HOUSTON TX 77005-3033

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

Name of Employer Occupation
SELF ORTHOPEDIC SURGEON

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 15 / 2010

Transaction ID: SA11.560

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JOHN LAUBACH

Mailing Address 9139 RANCH RIVER CIR

City State Zip Code
HIGHLANDS RANCH CO 80126-5078

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 18 / 2010

Transaction ID: SA11.498

Amount of Each Receipt this Period

500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 27 / 107
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
American Crossroads

A. Full Name (Last, First, Middle Initial)
THOMAS LAUER

Mailing Address 18 ORDWAY RD.

City State Zip Code
WELLESLEY MA 02481-6709

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
ADVENT INTERNATIONAL CORP- ORATION COO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt 09 / 18 / 2010
Transaction ID: SA11.515

Amount of Each Receipt this Period 2400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN T. LEIGH

Mailing Address 199 MOHAWK DRIVE

City State Zip Code
PITTSBURGH PA 15228-1564

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Self-Employed Courier

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 15 / 2010
Transaction ID: SA11.230

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DONALD LITTRELL

Mailing Address 205 CALIFORNIA DRIVE NE

City State Zip Code
FORT WALTON BEACH FL 32548-5009

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
AIR FORCE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 18 / 2010
Transaction ID: SA11.529

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) 3650.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
MARK MACDONALD

Mailing Address 8625 SOUTHWESTERN #711

City DALLAS State TX Zip Code 75206-8238

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

Name of Employer MACDONALD + MACDONALD PC Occupation LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 03 / 2010

Transaction ID: SA11.347

Amount of Each Receipt this Period 500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JAMES MARVIN

Mailing Address 3725 CHATAWAY COURT

City COLORADO SPRINGS State CO Zip Code 80906-4388

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 09 / 27 / 2010

Transaction ID: SA11.395

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DARYL MATSON

Mailing Address 1000 SELAH HEIGHTS ROAD

City SELAH State WA Zip Code 98942-9606

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

Name of Employer MATSON FRUITY COMPANY Occupation HUMAN RESOURCES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 24 / 2010

Transaction ID: SA11.429

Amount of Each Receipt this Period 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ▶ 6000.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 29 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
ZACHARY MAXFIELD

Mailing Address 360 FURMAN ST
UNIT 533

City State Zip Code
BROOKLYN NY 11201-4698

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

Name of Employer Occupation
SECOND CURVE CAPITAL ANALYST

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 16 / 2010

Transaction ID: SA11.556

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL MCCLURE

Mailing Address 3614 W. CAPILANO DRIVE

City State Zip Code
WEST LAFAYETTE IN 47906-8880

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
09 / 07 / 2010

Transaction ID: SA11.336

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SHAWN MCGUIRE

Mailing Address 3332 GLACIER RIDGE ROAD

City State Zip Code
MIDDLETON WI 53562-1769

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

Name of Employer Occupation
ST. MARY'S HOSPITAL HEALTH CARE WORKER

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2010

Transaction ID: SA11.457

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **1000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
PAUL C. P. MCILHENNY

Mailing Address PO BOX 96

City State Zip Code
AVERY ISLAND LA 70513-0096

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

Name of Employer Occupation
MCILHENNY CO. PRESIDENT & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 28 / 2010

Transaction ID: SA11.292

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
HOWARD MILLER

Mailing Address 1031 A MACARTHUR ROAD

City State Zip Code
READING PA 19605-9402

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

Name of Employer Occupation
RAINBOW RUBBER & PLASTICS OWNER/PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 25 / 2010

Transaction ID: SA11.420

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL MILLER

Mailing Address 4402 BOXWOOD ROAD

City State Zip Code
BETHESDA MD 20816-1818

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

Name of Employer Occupation
SELF INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 29 / 2010

Transaction ID: SA11.302

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 107
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
JAY MOYES

Mailing Address 1633 STONE RIDGE DRIVE

City BOUNTIFUL State UT Zip Code 84010-1032

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 23 / 2010
Transaction ID: SA11.450
 Amount of Each Receipt this Period: 1000.00
 CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
WILLIAM NETTLES

Mailing Address PO. BOX 2450

City EDWARDS State CO Zip Code 81632-2450

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 07 / 2010
Transaction ID: SA11.333
 Amount of Each Receipt this Period: 500.00
 CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JAMES O'SHAUGHNESSY

Mailing Address 4 JENIFER LANE

City COS COB State CT Zip Code 06807-1719

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

Name of Employer O'SHAUGHNESSY ASSET MANAGEMENT Occupation CHAIRMAN/CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt: 09 / 18 / 2010
Transaction ID: SA11.500
 Amount of Each Receipt this Period: 2400.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 3900.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 32 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JOHN OSTERMAN
Mailing Address 1406 CAMINO REAL
City YUMA State AZ Zip Code 85364-6292
FEC ID number of contributing federal political committee. **C**
Name of Employer OSTERMAN FINANCIAL GROUP Occupation OWNER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 09 / 20 / 2010
Transaction ID: SA11.468
Amount of Each Receipt this Period 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PETER E. OVERTON
Mailing Address P.O. BOX 2453
City OLYMPIA State WA Zip Code 98507-2453
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF Occupation INVESTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 09 / 13 / 2010
Transaction ID: SA11.225
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL OZIER
Mailing Address 501 MIDWESTERN PARKWAY
City WICHITA FALLS State TX Zip Code 76302-2302
FEC ID number of contributing federal political committee. **C**
Name of Employer CLINICS OF NORTH TEXAS Occupation PHYSICIAN
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 09 / 25 / 2010
Transaction ID: SA11.421
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 6000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
CONNIE R. PADILLA

Mailing Address 4806 INDIGO CT.

City State Zip Code
PUEBLO CO 81001-1055

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

Name of Employer Occupation
HOMEMAKER HOMEMAKER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: SA11.221

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROBERT F. PENCE

Mailing Address 1359 BEVERLY ROAD
STE. #200

City State Zip Code
MCLEAN VA 22101-3668

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

Name of Employer Occupation
THE PENCE GROUP, INC. REAL ESTATE DEVELOPER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 10000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 03 / 2010

Transaction ID: SA11.218

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
BOB J. PERRY

Mailing Address PO BOX 34153

City State Zip Code
HOUSTON TX 77234-4153

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

Name of Employer Occupation
PERRY HOMES HOME BUILDER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2000000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 10 / 2010

Transaction ID: SA11.222

Amount of Each Receipt this Period

2000000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

2012500.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
GOFFREY POHANKA

Mailing Address 2120 POLO POINTE DR

City State Zip Code
VIENNA VA 22181-2846

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

Name of Employer Occupation
POHANKA AUTOMOTIVE GROUP AUTO DEALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 15 / 2010

Transaction ID: SA11.561

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DEBORAH QUAZZO

Mailing Address 1500 N LAKE SHORE DR
21C

City State Zip Code
CHICAGO IL 60610-6686

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

Name of Employer Occupation
NEXTADVISORS INVESTMENT BANKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2010

Transaction ID: SA11.528

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
DAVID RAINES

Mailing Address 611 GRAMMONT ST

City State Zip Code
MONROE LA 71201-7516

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

Name of Employer Occupation
GI CLINIC PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 18 / 2010

Transaction ID: SA11.526

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3250.00**

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
LOWELL C. REED

Mailing Address 507 SANDY PORT STREET

City HOUSTON State TX Zip Code 77079-2451

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 07 / 2010
Transaction ID: SA11.219
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DARWIN REEDY

Mailing Address 51 PENINSULA ROAD

City DELLWOOD State MN Zip Code 55110-1504

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

Name of Employer SELF Occupation ART DEALER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 09 / 19 / 2010
Transaction ID: SA11.484
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LINDA REPAY

Mailing Address 738 PINEWOOD DRIVE

City HUDSON State OH Zip Code 44236-1076

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

Name of Employer ARGO TOOL CORPORATION Occupation VICE PRESIDENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 26 / 2010
Transaction ID: SA11.410
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 2500.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JEFFREY RHOADES

Mailing Address 4 MONARCH COVE

City State Zip Code
DANA POINT CA 92629-4246

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

Name of Employer SELF Occupation REAL ESTATE EXECUTIVE

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 18 / 2010
Transaction ID: SA11.514
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
FREDERICK ROBINSON

Mailing Address 52 NIGHTHAWK DR
BOX 7906

City State Zip Code
ASPEN CO 81612-7906

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

Name of Employer SELF Occupation INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 29 / 2010
Transaction ID: SA11.362
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CULLEN ROGERS

Mailing Address 3030 MCKINNEY AVE
#2001

City State Zip Code
DALLAS TX 75204-2451

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

Name of Employer SELF Occupation LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: SA11.477
Amount of Each Receipt this Period: 1000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1750.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
WILLIAM H. ROJ

Mailing Address 19200 N PARK BLVD.

City State Zip Code
SHAKER HEIGHTS OH 44122-1817

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

Name of Employer SELF Occupation INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10500.00

Date of Receipt: 09 / 15 / 2010
Transaction ID: SA11.232
Amount of Each Receipt this Period: 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM H. ROJ

Mailing Address 19200 N PARK BLVD.

City State Zip Code
SHAKER HEIGHTS OH 44122-1817

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

Name of Employer SELF Occupation INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10500.00

Date of Receipt: 09 / 28 / 2010
Transaction ID: SA11.293
Amount of Each Receipt this Period: 10000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
THOMAS ROSS

Mailing Address 410 OXFORD DRIVE

City State Zip Code
BOZEMAN MT 59715-1789

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 20 / 2010
Transaction ID: SA11.481
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10750.00

TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 38 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
NOEL ROVIRA

Mailing Address 123 LAKE DAVID DRIVE

City State Zip Code
PACYNUNE MS 39466-9120

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 05 / 2010

Transaction ID: SA11.340

Amount of Each Receipt this Period

500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
ROBERT B. ROWLING

Mailing Address 600 EAST LAS COLINAS BLVD.
STE. 1900

City State Zip Code
IRVING TX 75039-5601

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

Name of Employer Occupation
TRT HOLDINGS INC. CEO

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 1500000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 27 / 2010

Transaction ID: SA11.285

Amount of Each Receipt this Period

500000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JEFF RUBIN

Mailing Address 1456 PEACHTREE BATTLE AVE.

City State Zip Code
ATLANTA GA 30327-1426

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2010

Transaction ID: SA11.483

Amount of Each Receipt this Period

250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

500750.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 39 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JOE SANTOMO
Mailing Address P.O. BOX 167
City BROOKSIDE State NJ Zip Code 07926-0167
FEC ID number of contributing federal political committee. **C**
Name of Employer ICAP Occupation MANAGING DIRECTOR
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 14 / 2010
Transaction ID: SA11.310
Amount of Each Receipt this Period 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SAM SCAMARDO
Mailing Address 7500 CODER RD
City MAUMEE State OH Zip Code 43537-9345
FEC ID number of contributing federal political committee. **C**
Name of Employer ADVANCED ROOFING SERVICES-INC Occupation COMMERCIAL ROOFING
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 18 / 2010
Transaction ID: SA11.536
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JERRY SCHEER
Mailing Address P.O. BOX 8272
City NEWPORT BEACH State CA Zip Code 92658-8272
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00
Date of Receipt 09 / 08 / 2010
Transaction ID: SA11.332
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 1000.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 107
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
JERRY SCHEER

Mailing Address P.O. BOX 8272

City State Zip Code
NEWPORT BEACH CA 92658-8272

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
MM / DD / YYYY
09 / 21 / 2010

Transaction ID: SA11.459

Amount of Each Receipt this Period
500.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
DAVID SCOTT

Mailing Address 8804 N. KENSINGTON DR.

City State Zip Code
SPOKANE WA 99208-8003

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

Name of Employer Occupation
SELF SURGEON

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2010

Transaction ID: SA11.314

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
CHRIS SEAVER

Mailing Address 2200 WILLOWICK ROAD, 4C

City State Zip Code
HOUSTON TX 77027-4063

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
MM / DD / YYYY
09 / 24 / 2010

Transaction ID: SA11.436

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 107
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
American Crossroads

A. Full Name (Last, First, Middle Initial)
THOMAS SHRAGER

Mailing Address 40 WESTON RD

City WESTON State CT Zip Code 06883-2916

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

Name of Employer TWEEDY, BROWN Occupation ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt: 09 / 27 / 2010

Transaction ID: SA11.393

Amount of Each Receipt this Period: 10000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
STEVEN SIMONOFF

Mailing Address 15 TURTLE ROCK ROAD

City WINDHAM State NH Zip Code 03087-2308

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

Name of Employer SELF Occupation SOFTWARE ENGINEER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 23 / 2010

Transaction ID: SA11.446

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JUDY SISSON

Mailing Address 4408 LEDGEVIEW ROAD

City FORT WORTH State TX Zip Code 76109-2545

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 15 / 2010

Transaction ID: SA11.231

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 10750.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 42 / 107
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
KEITH SMITH

Mailing Address 2929 BLACKWOOD ROAD

City State Zip Code
DECATUR GA 30033-1011

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

Name of Employer Occupation
FIRST CAPITAL ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 14 / 2010

Transaction ID: SA11.562

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
MICHAEL SMITH

Mailing Address 6134 WILLERS WAY

City State Zip Code
HOUSTON TX 77057-2806

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

Name of Employer Occupation
SOURCE ROCK RESOURCES, IN- C. OIL AND GAS EXPLORATION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 20 / 2010

Transaction ID: SA11.476

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
ROBERT E. SMITTCAMP

Mailing Address 5811 N FORKNER AVENUE

City State Zip Code
FRESNO CA 93711-1266

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

Name of Employer Occupation
LYONS MAGNUS CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 29 / 2010

Transaction ID: SA11.301

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **10500.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 107
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A.	Full Name (Last, First, Middle Initial) THOMAS SOPER	Date of Receipt MM / DD / YYYY 09 / 18 / 2010
	Mailing Address 425 DAVIS STREET APT 1016	Transaction ID: SA11.509
	City State Zip Code EVANSTON IL 60201-4739	Amount of Each Receipt this Period 1000.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation RETIRED RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

B.	Full Name (Last, First, Middle Initial) PAULA STEINER	Date of Receipt MM / DD / YYYY 09 / 30 / 2010
	Mailing Address 865 ROSEWOOD DRIVE	Transaction ID: SA11.303
	City State Zip Code VILLA HILLS KY 41017-1333	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SST CONSULTANTS CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) PAUL STURGEON	Date of Receipt MM / DD / YYYY 09 / 29 / 2010
	Mailing Address 4019 COUNTRY CLUB DRIVE	Transaction ID: SA11.363
	City State Zip Code BAKERSFIELD CA 93306-3633	Amount of Each Receipt this Period 2400.00
	FEC ID number of contributing federal political committee. C	CONTRIBUTION
	Name of Employer Occupation SSI INC EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2400.00	

SUBTOTAL of Receipts This Page (optional)	3650.00
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 44 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
JARED SULLIVAN
 Mailing Address 60 COLEMAN AVE
 City CHATHAM State NJ Zip Code 07928-2278
 Date of Receipt 09 / 22 / 2010
Transaction ID: SA11.452
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF Occupation PHYSICIAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

B. Full Name (Last, First, Middle Initial)
MICHAEL SYPNIEWSKI
 Mailing Address 196 FISHERS ROAD
 City PITTSFORD State NY Zip Code 14534-9745
 Date of Receipt 09 / 05 / 2010
Transaction ID: SA11.341
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer SELF Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

C. Full Name (Last, First, Middle Initial)
CHRIS TAGGERT
 Mailing Address 2-12TH ST. 812
 City HOBOKEN State NJ Zip Code 07030-6785
 Date of Receipt 09 / 24 / 2010
Transaction ID: SA11.441
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION
 FEC ID number of contributing federal political committee. C
 Name of Employer CREDITSIGHTS Occupation ANALYST
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date 250.00

SUBTOTAL of Receipts This Page (optional) ► 750.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 45 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
JAMES TAYLOR

Mailing Address 2814 NORTH JUNETT ST

City State Zip Code
TACOMA WA 98407-6346

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

Name of Employer Occupation
MULTICARE HEALTH SYSTEM PHYSICIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2010

Transaction ID: SA11.475

Amount of Each Receipt this Period

250.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
RONALD THATCHER

Mailing Address 1002 S. LOIS AVE.

City State Zip Code
TAMPA FL 33629-4907

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

Name of Employer Occupation
RAYMOND JAMES FINANCIAL BRANCH MANAGER

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 20 / 2010

Transaction ID: SA11.472

Amount of Each Receipt this Period

250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
C. PHILIP THOLEN

Mailing Address 7626 SOUTH MARION

City State Zip Code
TULSA OK 74136-8005

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

Name of Employer Occupation
SAMSON INVESTMENT COMPANY EXECUTIVE

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 18 / 2010

Transaction ID: SA11.513

Amount of Each Receipt this Period

5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

5500.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 46 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
NANCY THOLEN
Mailing Address 7626 SOUTH MARION
City TULSA State OK Zip Code 74136-8005
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 5000.00
Date of Receipt 09 / 18 / 2010
Transaction ID: SA11.511
Amount of Each Receipt this Period 5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GERALD THOMAS
Mailing Address 6829 GREENE RD.
City WOODRIDGE State IL Zip Code 60517-1471
FEC ID number of contributing federal political committee. **C**
Name of Employer GERALD THOMAS Occupation SALES MANAGER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00
Date of Receipt 09 / 18 / 2010
Transaction ID: SA11.493
Amount of Each Receipt this Period 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PAUL TOLFSEN
Mailing Address 1312 BAY STREET
City BELLINGHAM State WA Zip Code 98225-4322
FEC ID number of contributing federal political committee. **C**
Name of Employer RETIRED Occupation RETIRED
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 09 / 02 / 2010
Transaction ID: SA11.352
Amount of Each Receipt this Period 500.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5750.00
TOTAL This Period (last page this line number only) ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 47 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
DERK VAN KONYNENBURG
 Mailing Address 13681 W. SUNSET BLVD.
 City State Zip Code
 PACIFIC PALISADES CA 90272-4019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EASTDIL SECURED Occupation REAL ESTATE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00
 Date of Receipt 09 / 02 / 2010
Transaction ID: SA11.351
 Amount of Each Receipt this Period 2400.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GEORGE A. VANDERHEIDEN
 Mailing Address P.O. BOX 669
 City State Zip Code
 WOLFEBORO NH 03894-0669
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FIDELITY INVESTMENTS Occupation ADVISOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00
 Date of Receipt 09 / 28 / 2010
Transaction ID: SA11.286
 Amount of Each Receipt this Period 300.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
CLARE VILLARI
 Mailing Address 158 COTTON STREET
 City State Zip Code
 NEWTON MA 02458-2641
 FEC ID number of contributing federal political committee. **C**
 Name of Employer RETIRED Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2400.00
 Date of Receipt 09 / 23 / 2010
Transaction ID: SA11.240
 Amount of Each Receipt this Period 2400.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 5100.00
TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
RONALD WALLACE

Mailing Address P.O. BOX 221797

City State Zip Code
EL PASO TX 79913-4797

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

Name of Employer Occupation
T TRIPLE R INC AIRCRAFT MANAGMENT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2400.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 21 / 2010

Transaction ID: SA11.456

Amount of Each Receipt this Period
2400.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
NATHAN WASSERSTRUM

Mailing Address 142 PAMELLIA

City State Zip Code
BELLAIRE TX 77401-3712

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1440.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 27 / 2010

Transaction ID: SA11.387

Amount of Each Receipt this Period
1440.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
BRUCE WETZEL

Mailing Address 7550 CODER RD

City State Zip Code
MAUMEE OH 43537-9345

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

Name of Employer Occupation
SELF REALTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y
09 / 24 / 2010

Transaction ID: SA11.444

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **4340.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 107
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
GENE WEXLER

Mailing Address 4 HERKIMER ROAD

City State Zip Code
SCARSDALE NY 10583-7615

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

Name of Employer Occupation
DRESS BARN, INC. LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
MM / DD / YYYY
09 / 26 / 2010

Transaction ID: SA11.412

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
KENNON WIGLEY

Mailing Address 3022 HICKORY RIDGE CIRCLE

City State Zip Code
BRYAN TX 77807-4853

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

Name of Employer Occupation
SELF PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: SA11.361

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
JAMES WILLIAMS

Mailing Address 6213 SE MAIN STREET

City State Zip Code
PORTLAND OR 97215-2816

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
MM / DD / YYYY
09 / 02 / 2010

Transaction ID: SA11.350

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **12750.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 50 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
OBANION WILLIAMS

Mailing Address 15 GREENWAY PLAZA
29A

City HOUSTON State TX Zip Code 77046-1508

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

Name of Employer SELF Occupation INVESTOR

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 18 / 2010
Transaction ID: SA11.525
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOHN W. WOOD, JR.

Mailing Address 132 WILLIAMS ROAD

City CONCORD State MA Zip Code 01742-4161

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

Name of Employer SELF Occupation CONSULTANT

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 09 / 22 / 2010
Transaction ID: SA11.236
Amount of Each Receipt this Period: 250.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
ROBERT WOODINGS

Mailing Address 6 MEADOWOOD DRIVE

City PITTSBURGH State PA Zip Code 15215-1842

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

Name of Employer IWCC Occupation LAWYER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt: 09 / 24 / 2010
Transaction ID: SA11.435
Amount of Each Receipt this Period: 4000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► 4500.00

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 107
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
ALLIANCE RESOURCE GP, LLC

Mailing Address P.O. BOX 22027

City State Zip Code
TULSA OK 74121-2027

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000000.00

Date of Receipt
MM / DD / YYYY
09 / 14 / 2010

Transaction ID: SA11.227

Amount of Each Receipt this Period
2000000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
HARRIS FARMS

Mailing Address 23300 W OAKLAND AVENUE

City State Zip Code
COALINGA CA 93210-9804

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
20000.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: SA11.299

Amount of Each Receipt this Period
20000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
SAN JOAQUIN BROKERAGE, INC.

Mailing Address 312-5TH STREET STE. B

City State Zip Code
CLOVIS CA 93612-1058

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
MM / DD / YYYY
09 / 29 / 2010

Transaction ID: SA11.297

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional) ► **2030000.00**

TOTAL This Period (last page this line number only) ►

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 52 / 107

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input 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)
American Crossroads

A.

Full Name (Last, First, Middle Initial)
SILVER CREEK ALMOND CO., INC.

Mailing Address 43940 W NORTH AVENUE

City State Zip Code
FIREBAUGH CA 93622-9771

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 29 / 2010

Transaction ID: SA11.300

Amount of Each Receipt this Period

10000.00

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)
TATE ENTERPRISES

Mailing Address 1175 NE 125TH STREET
STE. #102

City State Zip Code
NORTH MIAMI FL 33161-5009

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 23 / 2010

Transaction ID: SA11.243

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

C.

Full Name (Last, First, Middle Initial)
TRT HOLDINGS, INC.

Mailing Address 600 LAS COLINAS BLVD. E
STE. 1900

City State Zip Code
IRVING TX 75039-5626

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1341880.38

Date of Receipt

M M / D D / Y Y Y Y
09 / 27 / 2010

Transaction ID: SA11.284

Amount of Each Receipt this Period

500000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)

511000.00

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 53 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
WAWONA PACKING CO., LLC

Mailing Address 12133 AVENUE 408

City State Zip Code
CUTLER CA 93615-2056

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

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

Transaction ID: SA11.298

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WEAVER POPCORN COMPANY, INC.

Mailing Address 9850 WESTPOINT DRIVE
STE. 100

City State Zip Code
INDIANAPOLIS IN 46256-3365

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	6	/	2	0	1	0

Transaction ID: SA11.234

Amount of Each Receipt this Period
250000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	260000.00
TOTAL This Period (last page this line number only)	▶	6817447.00

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 54 / 107
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
Carr & Hyde

Mailing Address 27 Culpeper St.

City State Zip Code
Warrenton VA 20186

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 20 / 2010

Transaction ID: 15.002

Amount of Each Receipt this Period
150.00

Vendor Refund

B. Full Name (Last, First, Middle Initial)
MDI Imaging & Mail

Mailing Address 21955 Cascades Parkway

City State Zip Code
Dulles VA 20166

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 0.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2010

Transaction ID: 15.001

Amount of Each Receipt this Period
73600.00

Vendor Refund

SUBTOTAL of Receipts This Page (optional)	73750.00
TOTAL This Period (last page this line number only)	73750.00

**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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Michael Britt	Transaction ID: 21b.003 Date of Disbursement 09 / 02 / 2010
	Mailing Address 2024 Shining Feather Lane	Amount of Each Disbursement this Period 10000.00
	City Las Vegas State NV Zip Code 89134	
	Purpose of Disbursement Consulting, grassroots management	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Anne Byersdorfer	Transaction ID: 21b.086 Date of Disbursement 09 / 29 / 2010
	Mailing Address 6211 Wedgewood Road	Amount of Each Disbursement this Period 6250.00
	City Bethesda State MD Zip Code 20817	
	Purpose of Disbursement Consulting, media	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District: 00	

C.	Full Name (Last, First, Middle Initial) Jonathan Collegio	Transaction ID: 21b.004 Date of Disbursement 09 / 02 / 2010
	Mailing Address 421 E Columbia Street	Amount of Each Disbursement this Period 395.31
	City Falls Church State VA Zip Code 22046	
	Purpose of Disbursement Reimb. travel and mtg. exp. food & bev.	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District: 00	

SUBTOTAL of Disbursements This Page (optional)	▶	16645.31
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)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Jonathan Collegio</p> <p>Mailing Address 421 E Columbia Street</p> <p>City Falls Church State VA Zip Code 22046</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.030</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3207.89"/></p>
<p>B. Full Name (Last, First, Middle Initial) Jonathan Collegio</p> <p>Mailing Address 421 E Columbia Street</p> <p>City Falls Church State VA Zip Code 22046</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.101</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2844.39"/></p>
<p>C. Full Name (Last, First, Middle Initial) Paula Edwards</p> <p>Mailing Address 1200 G Street, NW Ste. 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Compliance reporting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.022</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p>

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)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Andrew Finnan</p> <p>Mailing Address 4800 9th Street, N #6</p> <p>City Arlington State VA Zip Code 22203</p> <p>Purpose of Disbursement Consulting, media</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.096</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3750.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 234 Justice Ct., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Petty Cash</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.001</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 234 Justice Ct., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.031</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="959.03"/></p>

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)

PAGE 58 / 107

<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)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 234 Justice Ct., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Reimb. office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.090</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="19.99"/></p>
<p>B. Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 234 Justice Ct., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.102</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="959.02"/></p>
<p>C. Full Name (Last, First, Middle Initial) Leslie Hagar</p> <p>Mailing Address 234 Justice Ct., NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Petty Cash</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.112</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> / <input type="text" value="27"/> / <input type="text" value="2010"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="200.00"/></p>

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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Steven Law</p> <p>Mailing Address 7726 Falstaff Road</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.032 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 6875.60</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Steven Law</p> <p>Mailing Address 7726 Falstaff Road</p> <p>City McLean State VA Zip Code 22102</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.103 Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 6558.10</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Chris McInerney</p> <p>Mailing Address 2914 S Buchanan Street</p> <p>City Arlington State VA Zip Code 22206</p> <p>Purpose of Disbursement Payroll</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.033 Date of Disbursement 09 / 15 / 2010</p> <p>Amount of Each Disbursement this Period 3793.79</p>

SUBTOTAL of Disbursements This Page (optional) ▶

17227.49

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)
American Crossroads

A. Full Name (Last, First, Middle Initial)
Chris McInerney

Mailing Address 2914 S Buchanan Street

City Arlington State VA Zip Code 22206

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

State: District: 00

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 21b.104
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
Kelly Nallen

Mailing Address 16 5th Street, SE #201

City Washington State DC Zip Code 20003

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

State: District: 00

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 21b.034
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
Kelly Nallen

Mailing Address 16 5th Street, SE #201

City Washington State DC Zip Code 20003

Purpose of Disbursement Reimb. office supplies

Candidate Name

Office Sought: House Senate President

State: District: 00

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 21b.067
Date of Disbursement

/ /

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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Kelly Nallen	Transaction ID: 21b.105 Date of Disbursement 09 / 30 / 2010
	Mailing Address 16 5th Street, SE #201	Amount of Each Disbursement this Period 561.37
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Sam Olswanger	Transaction ID: 21b.029 Date of Disbursement 09 / 15 / 2010
	Mailing Address 1691 Bryn Mawr Court	Amount of Each Disbursement this Period 1148.07
	City Germantown State TN Zip Code 22206	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Sam Olswanger	Transaction ID: 21b.069 Date of Disbursement 09 / 24 / 2010
	Mailing Address 1691 Bryn Mawr Court	Amount of Each Disbursement this Period 29.36
	City Germantown State TN Zip Code 22206	
	Purpose of Disbursement Reimb. office supplies, mtg. and travel	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1738.80
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)

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Sam Olswanger	Transaction ID: 21b.106 Date of Disbursement 09 / 30 / 2010
	Mailing Address 1691 Bryn Mawr Court	Amount of Each Disbursement this Period 1148.06
	City Germantown State TN Zip Code 22206	
	Purpose of Disbursement Payroll	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 21b.010 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1401 New York Avenue, NW Ste. 1200	Amount of Each Disbursement this Period 1796.62
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Blackberry service	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 21b.011 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1401 New York Avenue, NW Ste. 1200	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Computer service	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	7944.68
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)

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<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Computer software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.012 Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 1865.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Computer purchases</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.013 Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 8550.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Printing and copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.014 Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 724.05</p>

SUBTOTAL of Disbursements This Page (optional)	11139.05
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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 21b.015 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1401 New York Avenue, NW Ste. 1200	Amount of Each Disbursement this Period 848.40
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Equipment purchase	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 21b.016 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1401 New York Avenue, NW Ste. 1200	Amount of Each Disbursement this Period 1252.57
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Telephone & Internet	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) American Action Network	Transaction ID: 21b.017 Date of Disbursement 09 / 10 / 2010
	Mailing Address 1401 New York Avenue, NW Ste. 1200	Amount of Each Disbursement this Period 9925.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Office rent and parking	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	12025.97
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)

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<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)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) American Action Network</p> <p>Mailing Address 1401 New York Avenue, NW Ste. 1200</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Office supplies</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.018</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2200.56"/></p>
<p>B. Full Name (Last, First, Middle Initial) Arena Communications</p> <p>Mailing Address 1780 W Sequoia Circle</p> <p>City Salt Lake City State UT Zip Code 84104</p> <p>Purpose of Disbursement Direct Mail, Postage and Production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.084</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="6685.54"/></p> <p>See Schedule E on 12G Report</p>
<p>C. Full Name (Last, First, Middle Initial) Black Rock Group, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Consulting, advocacy communication</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.002</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="12612.00"/></p>

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)

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Black Rock Group LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Consulting, advocacy communication Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.087 Date of Disbursement 09 / 29 / 2010 <hr/> Amount of Each Disbursement this Period 12628.00
B.	Full Name (Last, First, Middle Initial) Carefirst, Blue Cross Blue Shield <hr/> Mailing Address PO Box 79749 <hr/> City Baltimore State MD Zip Code 21279-0749 <hr/> Purpose of Disbursement Health insurance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.058 Date of Disbursement 09 / 17 / 2010 <hr/> Amount of Each Disbursement this Period 3382.00
C.	Full Name (Last, First, Middle Initial) Carmines <hr/> Mailing Address 425 47th Street, NW <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Meeting exp. food & bev. Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.085 Date of Disbursement 09 / 27 / 2010 <hr/> Amount of Each Disbursement this Period 415.00

SUBTOTAL of Disbursements This Page (optional) ▶

16425.00

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)

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 21b.035 Date of Disbursement 09 / 15 / 2010
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll processing Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Clark Schaefer Hackett	Transaction ID: 21b.107 Date of Disbursement 09 / 30 / 2010
	Mailing Address 160 North Breiel Blvd.	Amount of Each Disbursement this Period 80.00
	City Middleton State OH Zip Code 45042	
	Purpose of Disbursement Payroll processing Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Competitive Media Reporting, LLC	Transaction ID: 21b.020 Date of Disbursement 09 / 10 / 2010
	Mailing Address PO Box 7247-9301	Amount of Each Disbursement this Period 17500.00
	City Philadelphia State PA Zip Code 19170	
	Purpose of Disbursement Subscriptions Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	17660.00
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)

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Connection Strategies	Transaction ID: 21b.019 Date of Disbursement 09 / 10 / 2010
	Mailing Address PO Box 2192	Amount of Each Disbursement this Period 258.51
	City Arlington State VA Zip Code 22202	
	Purpose of Disbursement Conference calls	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: 21b.025 Date of Disbursement 09 / 13 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period 500400.30
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Deposit, Media Placement	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: 21b.026 Date of Disbursement 09 / 15 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period -500400.30
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement See Schedule E	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	258.51
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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <hr/> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <hr/> <p>City Alexandria State VA Zip Code 22314</p> <hr/> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.027</p> <p>Date of Disbursement MM / DD / YYYY 09 / 13 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period 326453.10</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <hr/> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <hr/> <p>City Alexandria State VA Zip Code 22314</p> <hr/> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.028</p> <p>Date of Disbursement MM / DD / YYYY 09 / 15 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period -326453.10</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <hr/> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <hr/> <p>City Alexandria State VA Zip Code 22314</p> <hr/> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.038</p> <p>Date of Disbursement MM / DD / YYYY 09 / 17 / 2010</p> <hr/> <p>Amount of Each Disbursement this Period 533724.80</p>

SUBTOTAL of Disbursements This Page (optional) ▶

533724.80

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

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.039 Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2010	Amount of Each Disbursement this Period -533724.80
B.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Deposit, Media Placement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.040 Date of Disbursement M M / D D / Y Y Y Y 09 / 17 / 2010	Amount of Each Disbursement this Period 482924.20
C.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.041 Date of Disbursement M M / D D / Y Y Y Y 09 / 22 / 2010	Amount of Each Disbursement this Period -482924.20

SUBTOTAL of Disbursements This Page (optional) ▶

-533724.80

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

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<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.042 Date of Disbursement 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 320255.90</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.043 Date of Disbursement 09 / 21 / 2010</p> <p>Amount of Each Disbursement this Period -320255.90</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Crossroads Media, LLC</p> <p>Mailing Address 66 Canal Center Plaza Ste. 555</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.044 Date of Disbursement 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 643361.90</p>

SUBTOTAL of Disbursements This Page (optional) ▶

643361.90

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: 21b.045 Date of Disbursement 09 / 21 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period -643361.90
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement See Schedule E	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: 21b.046 Date of Disbursement 09 / 17 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period 381240.60
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Deposit, Media Placement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC	Transaction ID: 21b.047 Date of Disbursement 09 / 21 / 2010
	Mailing Address 66 Canal Center Plaza Ste. 555	Amount of Each Disbursement this Period -381240.60
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement See Schedule E	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	-643361.90
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Deposit, Media Placement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.064 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period 723604.80
B.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Deposit, Media Placement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.065 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period 618147.90
C.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement Deposit, Media Placement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.066 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 4 / 2 0 1 0	Amount of Each Disbursement this Period 346339.20

SUBTOTAL of Disbursements This Page (optional) ▶

1688091.90

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

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.073 Date of Disbursement 09 / 28 / 2010 <hr/> Amount of Each Disbursement this Period -723604.80
B.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.074 Date of Disbursement 09 / 28 / 2010 <hr/> Amount of Each Disbursement this Period -618147.90
C.	Full Name (Last, First, Middle Initial) Crossroads Media, LLC <hr/> Mailing Address 66 Canal Center Plaza Ste. 555 <hr/> City Alexandria State VA Zip Code 22314 <hr/> Purpose of Disbursement See Schedule E Candidate Name Category/Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.075 Date of Disbursement 09 / 28 / 2010 <hr/> Amount of Each Disbursement this Period -346339.20

SUBTOTAL of Disbursements This Page (optional) ▶

-1688091.90

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) DL and CO LLC</p> <p>Mailing Address 2440 N Edgewood Street</p> <p>City Arlington State VA Zip Code 22207</p> <p>Purpose of Disbursement Donor development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.088</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7500.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Financial Agent</p> <p>Mailing Address PO Box 970030</p> <p>City St. Louis State MO Zip Code 63197</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.036</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5416.99"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Financial Agent</p> <p>Mailing Address PO Box 970030</p> <p>City St. Louis State MO Zip Code 63197</p> <p>Purpose of Disbursement Payroll taxes</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.108</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="10"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5417.01"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) FLS Connect</p> <p>Mailing Address 7300 Hudson Blvd. Ste. 270</p> <p>City St. Paul State MN Zip Code 55128</p> <p>Purpose of Disbursement Conference calls</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.005 Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 948.54</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Gravity, LLC</p> <p>Mailing Address 450 Massachusetts Avenue, NW #1411</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Survey & polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.048 Date of Disbursement 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 10000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Gravity, LLC</p> <p>Mailing Address 450 Massachusetts Avenue, NW #1411</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Research Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.089 Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 10000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

20948.54

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Harleysville</p> <p>Mailing Address PO Box 37712</p> <p>City Philadelphia State PA Zip Code 19101</p> <p>Purpose of Disbursement Insurance</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.049</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="1"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="575.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Hathaway Strategies, LLC</p> <p>Mailing Address 740 E 52nd Street Ste. 10</p> <p>City Indianapolis State IN Zip Code 46205</p> <p>Purpose of Disbursement Consulting, grassroots management</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.091</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="7500.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) HoltzmanVogel, PLLC</p> <p>Mailing Address 45 North Hill Drive Ste. 100</p> <p>City Warrenton State VA Zip Code 20186</p> <p>Purpose of Disbursement Legal services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.092</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="20202.96"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) iContribute</p> <p>Mailing Address PO Box 8522</p> <p>City Falls Church State VA Zip Code 22041</p> <p>Purpose of Disbursement Website contribution processing</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.111</p> <p>Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 7756.13</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Lexis Nexis</p> <p>Mailing Address PO Box 7247-7090</p> <p>City Philadelphia State PA Zip Code 19170-7090</p> <p>Purpose of Disbursement Online, research</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.024</p> <p>Date of Disbursement 09 / 10 / 2010</p> <p>Amount of Each Disbursement this Period 954.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Linden Media</p> <p>Mailing Address 609 N West Street</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Research Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.050</p> <p>Date of Disbursement 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 5750.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14460.13

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)
American Crossroads

A. Full Name (Last, First, Middle Initial)
Majority Strategies

Mailing Address 135 Professional Drive
Ste. 104

City Ponte Vedra Beach State FL Zip Code 32082

Purpose of Disbursement Direct Mail, Postage and Production

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 21b.081
Date of Disbursement 09 / 29 / 2010

Amount of Each Disbursement this Period 73541.45

See Schedule E on 12G Report

B. Full Name (Last, First, Middle Initial)
Marsh Copsey & Associates

Mailing Address 601 Thirteenth Street, NW
11th Floor

City Washington State DC Zip Code 20005

Purpose of Disbursement TV/Media Production-did not air

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 21b.097
Date of Disbursement 09 / 30 / 2010

Amount of Each Disbursement this Period 4350.00

C. Full Name (Last, First, Middle Initial)
MAXimum Compliance, LLC

Mailing Address 4703 Woodway Lane, NW

City Washington State DC Zip Code 20016

Purpose of Disbursement Bookkeeping and Compliance

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 21b.093
Date of Disbursement 09 / 29 / 2010

Amount of Each Disbursement this Period 1500.00

SUBTOTAL of Disbursements This Page (optional) ► 79391.45

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)

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<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)
American Crossroads

A. Full Name (Last, First, Middle Initial) MB Public Affairs <hr/> Mailing Address 1215 K Street #790 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Research Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.051 Date of Disbursement 09 / 17 / 2010
	Amount of Each Disbursement this Period 15346.58

B. Full Name (Last, First, Middle Initial) McKenna & Associates <hr/> Mailing Address 2321 North Kentucky St. <hr/> City Arlington State VA Zip Code 22205 <hr/> Purpose of Disbursement Consulting, development Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.021 Date of Disbursement 09 / 10 / 2010
	Amount of Each Disbursement this Period 12500.00

C. Full Name (Last, First, Middle Initial) MDC & Associates, Inc. <hr/> Mailing Address 1701 Esquire Lane <hr/> City McLean State VA Zip Code 22101 <hr/> Purpose of Disbursement Bookkeeping and Compliance Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.098 Date of Disbursement 09 / 30 / 2010
	Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶	32846.58
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) MDI Imaging & Mail	Transaction ID: 21b.082
	Mailing Address 21955 Cascades Parkway	Date of Disbursement 09 / 29 / 2010
	City Dulles State VA Zip Code 20166	Amount of Each Disbursement this Period 124900.00
	Purpose of Disbursement Direct Marketing, Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MDI Imaging & Mail	Transaction ID: 21b.083
	Mailing Address 21955 Cascades Parkway	Date of Disbursement 09 / 29 / 2010
	City Dulles State VA Zip Code 20166	Amount of Each Disbursement this Period 7100.00
	Purpose of Disbursement Direct Marketing, Postage Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.	Transaction ID: 21b.059
	Mailing Address 600 Fairmont Avenue Ste. 306	Date of Disbursement 09 / 20 / 2010
	City Towson State MD Zip Code 21286	Amount of Each Disbursement this Period 235246.00
	Purpose of Disbursement Deposit, Media Placement Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	367246.00
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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc. Mailing Address 600 Fairmont Avenue Ste. 306 City Towson State MD Zip Code 21286 Purpose of Disbursement See Schedule E Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.060 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 1 0	Amount of Each Disbursement this Period -235246.00
B.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc. Mailing Address 600 Fairmont Avenue Ste. 306 City Towson State MD Zip Code 21286 Purpose of Disbursement Deposit, Media Placement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.061 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 1 0	Amount of Each Disbursement this Period 260480.00
C.	Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc. Mailing Address 600 Fairmont Avenue Ste. 306 City Towson State MD Zip Code 21286 Purpose of Disbursement See Schedule E Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.062 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 1 0	Amount of Each Disbursement this Period -260480.00

SUBTOTAL of Disbursements This Page (optional)	-235246.00
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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.</p> <p>Mailing Address 600 Fairmont Avenue Ste. 306</p> <p>City Towson State MD Zip Code 21286</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.070 Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 87279.04</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.</p> <p>Mailing Address 600 Fairmont Avenue Ste. 306</p> <p>City Towson State MD Zip Code 21286</p> <p>Purpose of Disbursement Deposit, Media Placement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.071 Date of Disbursement 09 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 214874.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.</p> <p>Mailing Address 600 Fairmont Avenue Ste. 306</p> <p>City Towson State MD Zip Code 21286</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.076 Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period -87279.04</p>

SUBTOTAL of Disbursements This Page (optional) ▶

214874.00

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)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Mentzer Media Services, Inc.</p> <p>Mailing Address 600 Fairmont Avenue Ste. 306</p> <p>City Towson State MD Zip Code 21286</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.077</p> <p>Date of Disbursement 09 / 27 / 2010</p> <p>Amount of Each Disbursement this Period -214874.00</p>
<p>B. Full Name (Last, First, Middle Initial) NMB Research</p> <p>Mailing Address 206 N Fayette St.</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Survey & polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.052</p> <p>Date of Disbursement 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 26400.00</p>
<p>C. Full Name (Last, First, Middle Initial) Old Dominion Research Group</p> <p>Mailing Address PO Box 151444</p> <p>City Alexandria State VA Zip Code 22315</p> <p>Purpose of Disbursement Research Services</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.006</p> <p>Date of Disbursement 09 / 02 / 2010</p> <p>Amount of Each Disbursement this Period 15000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

-173474.00

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)

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<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Olsen & Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd. #203</p> <p>City Austin State TX Zip Code 78701</p> <p>Purpose of Disbursement Direct Mail, Postage</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.063</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">164640.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Olsen & Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd. #203</p> <p>City Austin State TX Zip Code 78701</p> <p>Purpose of Disbursement See Schedule E</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.072</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">-164640.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Olsen & Shuvalov</p> <p>Mailing Address 1609 Shoal Creek Blvd. #203</p> <p>City Austin State TX Zip Code 78701</p> <p>Purpose of Disbursement Direct Mail, Printing and Production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.078</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p style="text-align: center;">97041.42</p> <p>See Schedule E on 12G Report</p>

SUBTOTAL of Disbursements This Page (optional)	97041.42
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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: 21b.079 Date of Disbursement 09 / 27 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period 82035.78
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement Direct Mail, Printing and Production	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: 21b.080 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period 149341.29
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement Direct Mail, Postage	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

See Schedule E on 12G Report

C.	Full Name (Last, First, Middle Initial) Olsen & Shuvalov	Transaction ID: 21b.110 Date of Disbursement 09 / 28 / 2010
	Mailing Address 1609 Shoal Creek Blvd. #203	Amount of Each Disbursement this Period -82035.78
	City Austin State TX Zip Code 78701	
	Purpose of Disbursement See Schedule E	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	149341.29
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)

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Public Opinion Strategies	Transaction ID: 21b.007 Date of Disbursement
	Mailing Address 214 North Fayette St.	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement: Survey & polling	<input type="text" value="58000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Public Opinion Strategies	Transaction ID: 21b.053 Date of Disbursement
	Mailing Address 214 North Fayette St.	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement: Survey & polling	<input type="text" value="17600.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Public Pulse Research	Transaction ID: 21b.008 Date of Disbursement
	Mailing Address 16100 Chesterfield Parkway West Ste. 175	<input type="text" value="09"/> / <input type="text" value="02"/> / <input type="text" value="2010"/>
	City Chesterfield State MO Zip Code 63017	Amount of Each Disbursement this Period
	Purpose of Disbursement: Survey & polling	<input type="text" value="9375.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="84975.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Public Pulse Research	Transaction ID: 21b.054 Date of Disbursement 09 / 17 / 2010
	Mailing Address 16100 Chesterfield Parkway West Ste. 175 City Chesterfield State MO Zip Code 63017 Purpose of Disbursement Survey & polling Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 3500.00

B.	Full Name (Last, First, Middle Initial) Qdoba	Transaction ID: 21b.068 Date of Disbursement 09 / 24 / 2010
	Mailing Address 555 11th Street, NW City Washington State DC Zip Code 20004 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 279.50

C.	Full Name (Last, First, Middle Initial) Red Hot and Blue	Transaction ID: 21b.094 Date of Disbursement 09 / 29 / 2010
	Mailing Address 1600 Wilson Blvd. City Arlington State VA Zip Code 22209 Purpose of Disbursement Mtg. exp. food & bev. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period 237.23

SUBTOTAL of Disbursements This Page (optional)	4016.73
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)

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<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)
American Crossroads

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rising Tide Media Group</p> <p>Mailing Address 226 S Fayette</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement TV/Media Production-did not air</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.095</p> <p>Date of Disbursement 09 / 29 / 2010</p> <p>Amount of Each Disbursement this Period 13394.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Rock Creek Advisors LLC</p> <p>Mailing Address PO Box 4963</p> <p>City Washington State DC Zip Code 20008</p> <p>Purpose of Disbursement Donor development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.099</p> <p>Date of Disbursement 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 7784.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) The Tarrance Group</p> <p>Mailing Address 201 N Union St. Ste. 410</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Survey & polling</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.055</p> <p>Date of Disbursement 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 24545.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

45723.00

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)

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Up Grade Films Mailing Address 3299 K Street, NW Ste. 200 City Washington State DC Zip Code 20007 Purpose of Disbursement TV/Media Production Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.023 Date of Disbursement 09 / 10 / 2010 Amount of Each Disbursement this Period 12889.27 See Schedule E on 30G Report
B.	Full Name (Last, First, Middle Initial) Up Grade Films Mailing Address 3299 K Street, NW Ste. 200 City Washington State DC Zip Code 20007 Purpose of Disbursement TV/Media Production Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.056 Date of Disbursement 09 / 17 / 2010 Amount of Each Disbursement this Period 2785.00 See Schedule E on 30G Report
C.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation Mailing Address PO Box 27264 City Richmond State VA Zip Code 23261 Purpose of Disbursement Payroll taxes Candidate Name Category/Type Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00 Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b.037 Date of Disbursement 09 / 15 / 2010 Amount of Each Disbursement this Period 1026.55

SUBTOTAL of Disbursements This Page (optional) ▶

16700.82

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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) Virginia Department of Taxation	Transaction ID: 21b.109 Date of Disbursement 09 / 30 / 2010
	Mailing Address PO Box 27264	Amount of Each Disbursement this Period 1026.55
	City Richmond State VA Zip Code 23261	
	Purpose of Disbursement Payroll taxes Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Visa	Transaction ID: SB21CCP.1 Date of Disbursement 09 / 07 / 2010
	Mailing Address PO Box 4513	Amount of Each Disbursement this Period 1668.27
	City Carol Stream State IL Zip Code 60197	
	Purpose of Disbursement Credit Card Payment Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Custon Scoop	Transaction ID: SC21CCD.2 Date of Disbursement 09 / 07 / 2010
	Mailing Address 130 Pembroke Road Ste. 150	Amount of Each Disbursement this Period 499.00
	City Concord State NH Zip Code 03301	
	Purpose of Disbursement Press Clippings Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	2694.82
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)

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<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)
American Crossroads

A.	Full Name (Last, First, Middle Initial) FedEx	Transaction ID: SC21CCD.1 Date of Disbursement 09 / 07 / 2010
	Mailing Address 942 South Shady Grove Road	Amount of Each Disbursement this Period 489.53
	City Memphis State IL Zip Code 38120	
	Purpose of Disbursement Shipping	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Potenza	Transaction ID: SC21CCD.4 Date of Disbursement 09 / 07 / 2010
	Mailing Address 15th & H Street, NW	Amount of Each Disbursement this Period 39.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement Mtg. exp. food & bev.	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) Praline	Transaction ID: SC21CCD.5 Date of Disbursement 09 / 07 / 2010
	Mailing Address 4611 Sangamore Road	Amount of Each Disbursement this Period 564.74
	City Bethesda State MD Zip Code 20816	
	Purpose of Disbursement Mtg. exp. food & bev.	
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

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<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)
American Crossroads

<p>A. Full Name (Last, First, Middle Initial) Seamless</p> <p>Mailing Address 232 Madison Avenue Ste. 1409</p> <p>City New York State NY Zip Code 10016</p> <p>Purpose of Disbursement Mtg. exp. food & bev.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SC21CCD.3 Date of Disbursement: 09 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 76.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Wilson-Grand Communications</p> <p>Mailing Address 429 N St. Asaph Street</p> <p>City Alexnandria State VA Zip Code 22314</p> <p>Purpose of Disbursement TV/Media Production</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.100 Date of Disbursement: 09 / 30 / 2010</p> <p>Amount of Each Disbursement this Period 13335.36</p> <p>See Schedule E on 12G Report</p>
<p>C. Full Name (Last, First, Middle Initial) Xigent, Inc.</p> <p>Mailing Address PO Box 320129</p> <p>City Alexandria State VA Zip Code 22320</p> <p>Purpose of Disbursement Website support and development</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: 00</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 21b.057 Date of Disbursement: 09 / 17 / 2010</p> <p>Amount of Each Disbursement this Period 10650.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

23985.36

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

931585.86

**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)

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<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

A. Full Name (Last, First, Middle Initial)
Republican State Leadership Committee

Mailing Address 1800 Diagonal Road
Ste. 230

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Non-federal contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 29.009

Date of Disbursement

09 / 10 / 2010

Amount of Each Disbursement this Period

600000.00

B. Full Name (Last, First, Middle Initial)
The New Prosperity Foundation

Mailing Address 200 S Wacker Drive
Ste. 4000

City Chicago State IL Zip Code 60606

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 29.111

Date of Disbursement

09 / 30 / 2010

Amount of Each Disbursement this Period

250000.00

Contribution to Independent
Political Committee

SUBTOTAL of Disbursements This Page (optional) ►

850000.00

TOTAL This Period (last page this line number only) ►

850000.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

Mailing Address
66 Canal Center Plaza
Ste. 555

City State Zip Code
Alexandria VA 22314

Purpose of Expenditure Category/Type
TV/Media Placement

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Calendar Year-To-Date Per Election for Office Sought 1786520.90

Date
MM / DD / YYYY
09 / 15 / 2010

Amount
500400.30

Transaction ID: E.001

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

Mailing Address
66 Canal Center Plaza
Ste. 555

City State Zip Code
Alexandria VA 22314

Purpose of Expenditure Category/Type
TV/Media Placement

Name of Federal Candidate supported or Opposed by expenditure:
Robin Carnahan

Calendar Year-To-Date Per Election for Office Sought 721964.70

Date
MM / DD / YYYY
09 / 15 / 2010

Amount
326453.10

Transaction ID: E.002

Office Sought: House State: MO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	826853.40
(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 D. Clancy
Signature

Date MM / DD / YYYY
10 / 20 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER ▼ C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
McCarthy Marcus Hennings LTD

Date
M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
1850 M Street, NW
Ste. 235

Amount
14271.00

City State Zip Code
Washington DC 20036

Transaction ID: E.015
Office Sought: House State: MO
 Senate District: _____
 Presidential

Purpose of Expenditure
TV/Media Production - notice filed on 9/15

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
Robin Carnahan

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
721964.70

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
McCarthy Marcus Hennings LTD

Date
M M / D D / Y Y Y Y
0 9 / 1 7 / 2 0 1 0

Mailing Address
1850 M Street, NW
Ste. 235

Amount
14691.00

City State Zip Code
Washington DC 20036

Transaction ID: E.016
Office Sought: House State: CO
 Senate District: _____
 Presidential

Purpose of Expenditure
TV/Media Production - notice filed on 9/15

Category/Type

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1786520.90

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	28962.00
(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 D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER ▼ C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Wilson-Grand Communications

Date
MM / DD / YYYY
09 / 21 / 2010

Mailing Address
429 N St. Asaph Street

Amount
11831.36

City State Zip Code
Alexandria VA 22314

Transaction ID: E.010

Purpose of Expenditure Category/Type
TV/Media Production

Office Sought: House State: NV
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Harry Reid

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
678426.46

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Up Grade Films

Date
MM / DD / YYYY
09 / 21 / 2010

Mailing Address
3299 K Street, NW Ste. 200

Amount
14968.23

City State Zip Code
Washington DC 20007

Transaction ID: E.011

Purpose of Expenditure Category/Type
TV/Media Production

Office Sought: House State: NH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Paul W. Hodes

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
658330.13

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	26799.59
(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 D. Clancy
Signature

Date MM / DD / YYYY
10 / 20 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

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

Mailing Address
66 Canal Center Plaza
Ste. 555

Amount
320255.90

City State Zip Code
Alexandria VA 22314

Transaction ID: E.005
Office Sought: House State: NV
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
TV/Media Placement

Name of Federal Candidate supported or Opposed by expenditure:
Harry Reid

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
678426.46

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

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

Mailing Address
66 Canal Center Plaza
Ste. 555

Amount
643361.90

City State Zip Code
Alexandria VA 22314

Transaction ID: E.006
Office Sought: House State: NH
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
TV/Media Placement

Name of Federal Candidate supported or Opposed by expenditure:
Paul W. Hodes

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
658330.13

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	963617.80
(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 D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER ▼ C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

Date
MM / DD / YYYY
09 / 21 / 2010

Mailing Address
66 Canal Center Plaza
Ste. 555

Amount
381240.60

City State Zip Code
Alexandria VA 22314

Transaction ID: E.007
Office Sought: House State: MO
 Senate District: _____
 Presidential

Purpose of Expenditure
TV/Media Placement

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
Robin Carnahan

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 721964.70

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Mentzer Media Services, Inc.

Date
MM / DD / YYYY
09 / 22 / 2010

Mailing Address
600 Fairmont Avenue
Ste. 306

Amount
235246.00

City State Zip Code
Towson MD 21286

Transaction ID: E.008
Office Sought: House State: KY
 Senate District: _____
 Presidential

Purpose of Expenditure
TV/Media Placement

Category/
Type

Name of Federal Candidate supported or Opposed by expenditure:
John (Jack) William Conway

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 478771.28

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	616486.60
(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 D. Clancy
Signature

Date MM / DD / YYYY
10 / 20 / 2010

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mentzer Media Services, Inc.

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

Mailing Address
600 Fairmont Avenue
Ste. 306

Amount
260480.00

City State Zip Code
Towson MD 21286

Transaction ID: E.009

Purpose of Expenditure
TV/Media Placement

Category/Type

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Lee Irwin Fisher

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
820604.84

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

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

Mailing Address
66 Canal Center Plaza
Ste. 555

Amount
533724.80

City State Zip Code
Alexandria VA 22314

Transaction ID: E.003

Purpose of Expenditure
TV/Media Placement

Category/Type

Office Sought: House State: CO
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
1786520.90

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	794204.80
(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 D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

Mailing Address
66 Canal Center Plaza
Ste. 555

City Alexandria	State VA	Zip Code 22314
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Purpose of Expenditure TV/Media Placement	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Alexander Giannoulis

Calendar Year-To-Date Per Election for Office Sought	1119249.87
---	------------

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

Amount
482924.20

Transaction ID: E.004

Office Sought: House State: IL
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Up Grade Films

Mailing Address
3299 K Street, NW
Ste. 200

City Washington	State DC	Zip Code 20007
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Purpose of Expenditure TV/Media Production	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Alexander Giannoulis

Calendar Year-To-Date Per Election for Office Sought	1119249.87
---	------------

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

Amount
18177.77

Transaction ID: E.012

Office Sought: House State: IL
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	501101.97
(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 D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Rising Tide Media Group, LLC

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

Mailing Address
226 S Fayette

Amount
18504.00

City State Zip Code
Alexandria VA 22314

Transaction ID: E.013

Purpose of Expenditure
TV/Media Production

Category/
Type

Office Sought: House State: OH
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
Lee Irwin Fisher

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 820604.84

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Wilson-Grand Communications

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

Mailing Address
429 N St. Asaph Street

Amount
13805.28

City State Zip Code
Alexandria VA 22314

Transaction ID: E.014

Purpose of Expenditure
TV/Media Production

Category/
Type

Office Sought: House State: KY
 Senate District: _____
 Presidential

Name of Federal Candidate supported or Opposed by expenditure:
John (Jack) William Conway

Check One: Support Oppose

Calendar Year-To-Date Per Election
for Office Sought 478771.28

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	32309.28
(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 D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER ▼ C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Mentzer Media Services, Inc.

Mailing Address
600 Fairmont Avenue
Ste. 306

City Towson	State MD	Zip Code 21286
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Purpose of Expenditure TV/Media Placement	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
John (Jack) William Conway

Calendar Year-To-Date Per Election for Office Sought	478771.28
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Date
M M / D D / Y Y Y Y
0 9 / 2 7 / 2 0 1 0

Amount
214874.00

Transaction ID: E.022

Office Sought: House State: KY
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Olsen & Shuvalov

Mailing Address
1609 Shoal Creek Blvd.
#203

City Austin	State TX	Zip Code 78701
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Purpose of Expenditure Direct Mail, Printing/Production	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Marco Rubio

Calendar Year-To-Date Per Election for Office Sought	246675.78
---	-----------

Date
M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount
82035.78

Transaction ID: E.023

Office Sought: House State: FL
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	296909.78
(b) SUBTOTAL of Unitemized Independent Expenditures	[Empty Box]
(c) TOTAL Independent Expenditures	[Empty Box]

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 D. Clancy _____ Date M M / D D / Y Y Y Y
Signature 1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
McCarthy Marcus Hennings, Ltd.

Mailing Address
1850 M Street, NW
Ste. 235

City	State	Zip Code
Washington	DC	20036

Purpose of Expenditure TV/Media Production- notice filed on 9/24- 7/2010	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Calendar Year-To-Date Per Election for Office Sought	1786520.90
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Date
M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount
14100.00

Transaction ID: E.024

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Wilson-Grand Communications

Mailing Address
429 N St. Asaph Street

City	State	Zip Code
Alexandria	VA	22314

Purpose of Expenditure TV/Media Production	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
John (Jack) William Conway

Calendar Year-To-Date Per Election for Office Sought	478771.28
---	-----------

Date
M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount
14846.00

Transaction ID: E.025

Office Sought: House State: KY
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	28946.00
(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 D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Olsen & Shuvalov

Mailing Address
1609 Shoal Creek Blvd.
#203

City	State	Zip Code
Austin	TX	78701

Purpose of Expenditure Direct Mail, Postage	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Marco Rubio

Calendar Year-To-Date Per Election for Office Sought	246675.78
---	-----------

Date
M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount
164640.00

Transaction ID: E.017

Office Sought: House State: FL
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

Mailing Address
66 Canal Center Plaza
Ste. 555

City	State	Zip Code
Alexandria	VA	22314

Purpose of Expenditure TV/Media Placement	Category/ Type
--	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
Michael F. Bennet

Calendar Year-To-Date Per Election for Office Sought	1786520.90
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Date
M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount
723604.80

Transaction ID: E.018

Office Sought: House State: CO
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	888244.80
(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 D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

Mailing Address
66 Canal Center Plaza
Ste. 555

City Alexandria	State VA	Zip Code 22314
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Purpose of Expenditure TV/Media Placement	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Alexander Giannoulas

Calendar Year-To-Date Per Election for Office Sought	1119249.87
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Date
M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount
618147.90

Transaction ID: E.019

Office Sought: House State: IL
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

Full Name (Last, First, Middle, Initial) of Payee
Crossroads Media, LLC

Mailing Address
66 Canal Center Plaza
Ste. 555

City Alexandria	State VA	Zip Code 22314
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Purpose of Expenditure TV/Media Placement	Category/ Type
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Name of Federal Candidate supported or Opposed by expenditure:
Harry Reid

Calendar Year-To-Date Per Election for Office Sought	678426.46
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Date
M M / D D / Y Y Y Y
0 9 / 2 8 / 2 0 1 0

Amount
346339.20

Transaction ID: E.020

Office Sought: House State: NV
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2010

(a) SUBTOTAL of Itemized Independent Expenditures	964487.10
(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 D. Clancy
Signature

Date M M / D D / Y Y Y Y
1 0 / 2 0 / 2 0 1 0

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads		FEC IDENTIFICATION NUMBER C C00487363
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		
Full Name (Last, First, Middle, Initial) of Payee Mentzer Media Services, Inc.		Date M M / D D / Y Y Y Y 09 / 29 / 2010
Mailing Address 600 Fairmont Avenue Ste. 306		Amount 87279.04
City State Zip Code Towson MD 21286		Transaction ID: E.021
Purpose of Expenditure TV/Media Placement		Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> Presidential
Name of Federal Candidate supported or Opposed by expenditure: Lee Irwin Fisher		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2010
		820604.84

(a) SUBTOTAL of Itemized Independent Expenditures	87279.04
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	6056202.16
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 D. Clancy Signature	Date M M / D D / Y Y Y Y 10 / 20 / 2010