

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.
American Crossroads

ADDRESS (number and street)
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / through / /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Caleb Crosby

Signature of Treasurer Caleb Crosby [Electronically Filed] Date / /

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Crossroads

Report Covering the Period: From: 10 / 04 / 2011 To: 12 / 31 / 2011

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="YYYYYY"/> 2011		758335.36
(b) Cash on Hand at Beginning of Reporting Period.....	4963378.20	
(c) Total Receipts (from Line 19)	11688215.00	18368102.46
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	16651593.20	19126437.82
7. Total Disbursements (from Line 31).....	1059299.83	3534144.05
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	15592293.37	15592293.77
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: / / To: / /

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).....	11673600.00	18185675.00
(ii) Unitemized	9615.00	19608.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11683215.00	18205283.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	11688215.00	18210283.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	157819.46
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	11688215.00	18368102.46
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11688215.00	18368102.46

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	1059299.83	2517795.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	1059299.83	2517795.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	1016348.69
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1059299.83	3534144.05
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1059299.83	3534144.05

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	11688215.00	18210283.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	11688215.00	18210283.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1059299.83	2517795.36
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	157819.46
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1059299.83	2359975.90

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XA
Transaction ID :

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

Form/Schedule:
Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 146
	<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	

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

Full Name (Last, First, Middle Initial)
A. CRAIG AMATO

Mailing Address 1394 LUTCHER AVENUE

City LUTCHER	State LA	Zip Code 70071-5402
-----------------	-------------	------------------------

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

Name of Employer ANATO'S	Occupation ELECTRICIAN
-----------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	05	/	2011

Transaction ID : SA11.4561

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. CRAIG AMATO

Mailing Address 1394 LUTCHER AVENUE

City LUTCHER	State LA	Zip Code 70071-5402
-----------------	-------------	------------------------

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

Name of Employer ANATO'S	Occupation ELECTRICIAN
-----------------------------	---------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	18	/	2011

Transaction ID : SA11.4579

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CHARLES DENNIS ANDERSON

Mailing Address 563 S. PERALTA HILLS DRIVE

City ANAHEIM	State CA	Zip Code 92807-3520
-----------------	-------------	------------------------

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

Name of Employer ANDERSON SEAFOODS INC	Occupation EXECUTIVE
---	-------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	28	/	2011

Transaction ID : SA11.4916

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
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 8 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. JOHN ATHERTON
 Mailing Address 16 COACHLIGHT DRIVE
 City State Zip Code
 POUGHKEEPSIE NY 12603-4241
 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 ▼
 1100.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 23 / 2011
Transaction ID : SA11.4816
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. JUDY SEDER BARDUGO
 Mailing Address 200 SOUTH IRVING BLVD.
 City State Zip Code
 LOS ANGELES CA 90004-3810
 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 M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : SA11.4986
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. RAY BARRETTE
 Mailing Address 25 BURKEHAVEN LN
 City State Zip Code
 SUNAPEE NH 03782-2401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WHITE MOUNTAINS INSURANCE GROUP CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : SA11.4885
 Amount of Each Receipt this Period
 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00
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 9 OF 146
	<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. WILLIAM BECKER
Full Name (Last, First, Middle Initial)

Mailing Address 126 TAWNEY EAGLE CT.

City HUNTERTOWN State IN Zip Code 46748-9222

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

Name of Employer PRO RESOURCES, INC. Occupation OWNER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : SA11.4956

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

B. PIERO BIANCANI
Full Name (Last, First, Middle Initial)

Mailing Address 6 COVESIDE COURT

City EAST GREENWICH State RI Zip Code 02818-4601

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

Name of Employer RI HOSPITAL Occupation MEDICAL RESEARCH

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : SA11.4945

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. CHRISTOPHER BOBIN
Full Name (Last, First, Middle Initial)

Mailing Address 808 COLUMBUS AVENUE PH4B

City NEW YORK State NY Zip Code 10025-5179

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

Name of Employer NATIONAL AUSTRALIA BANK Occupation BANKING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : SA11.4996

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3000.00

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 11 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. BOB CIULLA		Date of Receipt 12 / 28 / 2011 Transaction ID : SA11.4920
Mailing Address 7017 KINGSCOTE PARK		Amount of Each Receipt this Period 1000.00
City INDEPENDENCE	State OH	Zip Code 44131-6501
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer JFC CAPITAL	Occupation MANAGING DIRECTOR	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) B. A. JAMES CLARK		Date of Receipt 11 / 29 / 2011 Transaction ID : SA11.4724
Mailing Address 7500 OLD GEORGETOWN ROAD		Amount of Each Receipt this Period 50000.00
City BETHESDA	State MD	Zip Code 20814-6133
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer CLARK ENTERPRISES, INC.	Occupation CHAIRMAN AND C.E.O.	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) C. LEO W. COOK		Date of Receipt 12 / 31 / 2011 Transaction ID : SA11.5107
Mailing Address 74615 WREN DRIVE		Amount of Each Receipt this Period -1000.00
City INDIAN WELLS	State CA	Zip Code 92210-7363
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 0.00	

SUBTOTAL of Receipts This Page (optional).....▶	50000.00
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 OF 146
	<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. GEORGEAN DEBLOIS
Full Name (Last, First, Middle Initial)

Mailing Address 4122 OLD GUN RD E

City MIDLOTHIAN State VA Zip Code 23113-1342

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

Name of Employer COMMONWEALTH LABORATORY CONSULT, Occupation PHYSICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 10 / 2011
Transaction ID : SA11.4833

Amount of Each Receipt this Period 250.00

CONTRIBUTION

B. WILLIAM CHARLES DIERCKSEN
Full Name (Last, First, Middle Initial)

Mailing Address 1239 CAMBRIA BND

City KISSIMMEE State FL Zip Code 34759-3616

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 12 / 30 / 2011
Transaction ID : SA11.5003

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C. ROGER A. DORF
Full Name (Last, First, Middle Initial)

Mailing Address 13226 SHORE VISTA DRIVE

City AUSTIN State TX Zip Code 78732-1608

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

Name of Employer AIRWALK COMMUNICATIONS Occupation EXECUTIVE CHAIRMAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 05 / 2011
Transaction ID : SA11.4562

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 15500.00

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 13 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. JOHN DOWD		Date of Receipt 12 / 16 / 2011 Transaction ID : SA11.4861
Mailing Address 1529 CROWELL ROAD		Amount of Each Receipt this Period 10000.00
City VIENNA	State VA	Zip Code 22182-1514
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer AKIN,GUMP,STRAUSS,HAUER & FELD,LLP	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00	

Full Name (Last, First, Middle Initial) B. JANET J. DUCHOSSOIS		Date of Receipt 12 / 28 / 2011 Transaction ID : SA11.4874
Mailing Address 1515 W. 22ND STREET STE. 650		Amount of Each Receipt this Period 250000.00
City OAK BROOK	State IL	Zip Code 60523-2026
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 ▼ 250000.00	

Full Name (Last, First, Middle Initial) C. BRIAN DUNCAN		Date of Receipt 10 / 04 / 2011 Transaction ID : SA11.4555
Mailing Address 2332 EVERGREEN ST		Amount of Each Receipt this Period 100.00
City PAMPA	State TX	Zip Code 79065-2901
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF	Occupation INSURANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

SUBTOTAL of Receipts This Page (optional).....▶	260100.00
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 14 OF 146
	<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. BRIAN DUNCAN
Full Name (Last, First, Middle Initial)

Mailing Address 2332 EVERGREEN ST

City PAMPA State TX Zip Code 79065-2901

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

Name of Employer SELF Occupation INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 15 / 2011

Transaction ID : SA11.4857

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

B. BRIAN DUNCAN
Full Name (Last, First, Middle Initial)

Mailing Address 2332 EVERGREEN ST

City PAMPA State TX Zip Code 79065-2901

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

Name of Employer SELF Occupation INSURANCE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 20 / 2011

Transaction ID : SA11.5072

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

C. STEPHEN EICHENBERGER
Full Name (Last, First, Middle Initial)

Mailing Address 25 CENTRAL PARK WEST. APT. 21J

City NEW YORK State NY Zip Code 10023-7231

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

Name of Employer JP MORGAN CHASE Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011

Transaction ID : SA11.5007

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1200.00
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 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. DANIEL FINLEY
 Mailing Address P.O. BOX 27535
 City State Zip Code
 HOUSTON TX 77227-7535
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2011
Transaction ID : SA11.5074
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. LARRY FRANKLIN
 Mailing Address P.O. BOX 269
 City State Zip Code
 SAN ANTONIO TX 78291-0269
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 HARTE-HANKS, INC. CHAIRMAN & CEO
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : SA11.4823
 Amount of Each Receipt this Period
 25000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DAVID R. FRAUENSHUH
 Mailing Address 7101 WEST 78TH STREET
 SUITE 100
 City State Zip Code
 MINNEAPOLIS MN 55439-2527
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FRAUENSHUH OWNER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 30 / 2011
Transaction ID : SA11.4977
 Amount of Each Receipt this Period
 10000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 35500.00
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 16 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. ROBERT B. FRAZER, SR.

Mailing Address 404 CATOOSA LANE

City Loudon State TN Zip Code 37774-2127

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
M M M / D D D / Y Y Y Y Y Y
12 / 28 / 2011
Transaction ID : SA11.4940

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. PHILIP H. GEIER

Mailing Address 70 EAST 55TH STREET
15TH FLOOR

City NEW YORK State NY Zip Code 10022-3386

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

Name of Employer THE GEIER GROUP Occupation CHAIRMAN EMERITUS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 22 / 2011
Transaction ID : SA11.4583

Amount of Each Receipt this Period
200000.00

CONTRIBUTION

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

Mailing Address 70 EAST 55TH STREET
15TH FLOOR

City NEW YORK State NY Zip Code 10022-3386

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

Name of Employer THE GEIER GROUP Occupation CHAIRMAN EMERITUS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 23 / 2011
Transaction ID : SA11.4696

Amount of Each Receipt this Period
300000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 500250.00

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 17 OF 146
	<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

Full Name (Last, First, Middle Initial)
A. DENNIS ALLEN GEORGE

Mailing Address **6377 W. 78TH STREET**

City	State	Zip Code
LOS ANGELES	CA	90045-1440

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

Name of Employer	Occupation
SELF EMPLOYED	INDEPENDENT CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
12 / 29 / 2011

Transaction ID : SA11.4880

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. 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 ▼ **250000.00**

Date of Receipt
10 / 21 / 2011

Transaction ID : SA11.4569

Amount of Each Receipt this Period
250000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. RITA GOLLEHER

Mailing Address **145 S GOLDEN EAGLE DR**

City	State	Zip Code
HAILEY	ID	83333-5129

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 ▼ **250.00**

Date of Receipt
11 / 14 / 2011

Transaction ID : SA11.4811

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250500.00
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 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. PAUL GORDON
 Mailing Address 9001 FERNWOOD RD
 City State Zip Code
 BETHESDA MD 20817-3017
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GORDON CONTRACTORS ENGINEER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : SA11.4954
 Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. LAWRENCE J. GORMAN
 Mailing Address 235 W 56TH ST APT 25N
 City State Zip Code
 NEW YORK NY 10019-4332
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GUARDIAN LIFE ATTORNEY
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 28 / 2011
Transaction ID : SA11.4950
 Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. HOUSTON H. HARTE
 Mailing Address P.O. BOX 17424
 City State Zip Code
 SAN ANTONIO TX 78217-0424
 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 ▼
 25000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 07 / 2011
Transaction ID : SA11.4824
 Amount of Each Receipt this Period
 25000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 26500.00
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 19 OF 146
	<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. THOMAS HAYES
Full Name (Last, First, Middle Initial)

Mailing Address 5 COMSTOCK PLACE

City CHARLESTON State WV Zip Code 25314-1207

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 ▼ 1600.00

Date of Receipt 11 / 19 / 2011
Transaction ID : SA11.4804

Amount of Each Receipt this Period 1600.00

CONTRIBUTION

B. CARMEN HERNANDEZ
Full Name (Last, First, Middle Initial)

Mailing Address 5714 YELLOWSTONE ROAD FIRST FLOOR

City DALLAS State TX Zip Code 75235-6022

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

Name of Employer BOWMAN AND BROOKE LLP Occupation LEGAL SECRETARY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 11 / 15 / 2011
Transaction ID : SA11.5077

Amount of Each Receipt this Period 100.00

CONTRIBUTION

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

Mailing Address 112 SANDSTONE DR

City HOLLIDAYSBURG State PA Zip Code 16648-9787

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

Name of Employer BLAIR MEDICAL ASSOCIATES Occupation PHYSICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 31 / 2011
Transaction ID : SA11.5009

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1950.00

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 20 OF 146
	<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. KEVIN HURD
Full Name (Last, First, Middle Initial)

Mailing Address 800 MADISON ST
APT 336

City HOBOKEN State NJ Zip Code 07030-6493

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

Name of Employer CITIGROUP Occupation PRODUCT MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
10 / 29 / 2011
Transaction ID : SA11.5078

Amount of Each Receipt this Period
300.00

CONTRIBUTION

B. PAUL JACROUX
Full Name (Last, First, Middle Initial)

Mailing Address 925 5TH AVE.
D-1

City KIRKLAND State WA Zip Code 98033-3919

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
12 / 18 / 2011
Transaction ID : SA11.4864

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. BRENT JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 1725 HUNTWOOD DR.

City CHERRY VALLEY State IL Zip Code 61016-9560

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

Name of Employer RINGLAND-JOHNSON CONSTRUCTION Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
10 / 24 / 2011
Transaction ID : SA11.5079

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 1550.00

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 21 OF 146
	<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

Full Name (Last, First, Middle Initial) A. NEEL C. JOHNSON		Date of Receipt 12 / 30 / 2011 Transaction ID : SA11.5006
Mailing Address 349 SALEM CHURCH RD		Amount of Each Receipt this Period 250.00
City SUNFISH LAKE	State MN	Zip Code 55118-4720
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer WELLS FARGO	Occupation BANKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. F. JOHN KEOGH, III		Date of Receipt 12 / 29 / 2011 Transaction ID : SA11.4988
Mailing Address 187 EARL COURT		Amount of Each Receipt this Period 250.00
City GROSSE POINTE FARMS	State MI	Zip Code 48236-3013
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer RAYMOND JAMES & ASSOCIATES	Occupation FINANCIAL CONSULTANT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. JANICE LEVERING KING		Date of Receipt 12 / 29 / 2011 Transaction ID : SA11.4993
Mailing Address 624 WELLESLEY DRIVE		Amount of Each Receipt this Period 1000.00
City HOUSTON	State TX	Zip Code 77024-5507
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer INFO REQUESTED	Occupation INFO REQUESTED	
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: (check only one)	PAGE 22 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. STEPHEN L. KITTERMAN		Date of Receipt 12 / 31 / 2011 Transaction ID : SA11.5034
Mailing Address 105 20TH AVENUE		Amount of Each Receipt this Period 250.00
City ST. PETE BEACH	State FL	Zip Code 33706-4101
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer ROTHSTEIN ROSENTEIDT AND ADLER	Occupation ATTORNEY	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. WILLIAM HAROLD KNIGHT		Date of Receipt 12 / 29 / 2011 Transaction ID : SA11.4998
Mailing Address 6195 GREEN MEADOWS		Amount of Each Receipt this Period 2500.00
City MEMPHIS	State TN	Zip Code 38120-3102
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer MEMPHIS ORTHOPEDIC GROUP	Occupation PHYSICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) C. PETER JOSEPH KUNZ		Date of Receipt 12 / 06 / 2011 Transaction ID : SA11.4830
Mailing Address 915 BRIDLE LANE		Amount of Each Receipt this Period 600.00
City CARY	State IL	Zip Code 60013-6321
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer WILLIS NORTH AMERICA	Occupation INSURANCE EXECUTIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	3350.00
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 23 OF 146
	<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. PATRICK F. LATTERELL
Full Name (Last, First, Middle Initial)

Mailing Address 1550 TIBURON BLVD #506

City TIBURON State CA Zip Code 94920-2564

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

Name of Employer LATTERELL VENTURE Occupation INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
11 / 08 / 2011
Transaction ID : SA11.4576

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

B. RAYMOND LIGGIO
Full Name (Last, First, Middle Initial)

Mailing Address 6 WILLIAMS TERRACE

City SWAMPSCOTT State MA Zip Code 01907-2724

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

Name of Employer NORTHEAST EYE CARE Occupation OPHTHALMOLOGIST

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 28 / 2011
Transaction ID : SA11.4942

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. DANIEL LOEB
Full Name (Last, First, Middle Initial)

Mailing Address 390 PARK AVENUE

City NEW YORK State NY Zip Code 10022-4608

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

Name of Employer THIRD POINT, L.L.C. Occupation HEDGE FUND MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
12 / 30 / 2011
Transaction ID : SA11.4979

Amount of Each Receipt this Period
50000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 60250.00

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 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. WENDI MAHONEY
 Mailing Address 106 ABBEYWOOD DR.
 City State Zip Code
 NASHVILLE TN 37215-6143
 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 ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 19 / 2011
Transaction ID : SA11.5082
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. JULIE F. MALMSTROM
 Mailing Address 27391 OAK KNOLL DR.
 City State Zip Code
 BONITA SPRINGS FL 34134-8740
 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 M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011
Transaction ID : SA11.4889
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. J.J. MATTHEWS
 Mailing Address P.O. BOX 176
 City State Zip Code
 ABILENE TX 79604-0176
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 SELF-EMPLOYED INVESTOR
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 150000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 22 / 2011
Transaction ID : SA11.4871
 Amount of Each Receipt this Period
 50000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50500.00
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 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. PETER MC CAULEY

Mailing Address 3875 CALIFORNIA RD

City State Zip Code
ORCHARD PARK NY 14127-2239

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

Name of Employer Occupation
MCGARD, LLC PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
12 / 28 / 2011
Transaction ID : SA11.4907

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DAVID MEEK

Mailing Address 560 DIAMOND POINT DR.

City State Zip Code
OAK POINT TX 75068-2256

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

Name of Employer Occupation
CLG BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
12 / 12 / 2011
Transaction ID : SA11.4835

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DENA MEEK

Mailing Address 560 DIAMOND POINT DR.

City State Zip Code
OAK POINT TX 75068-2256

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 ▼
2000.00

Date of Receipt
12 / 12 / 2011
Transaction ID : SA11.4836

Amount of Each Receipt this Period
1000.00

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: (check only one)	PAGE 26 OF 146
	<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

Full Name (Last, First, Middle Initial) A. TIM MENDELSON		Date of Receipt 12 / 28 / 2011 Transaction ID : SA11.4902
Mailing Address 501 E. CROOKED CREEK LANE		Amount of Each Receipt this Period 250.00
City HENDERSONVILLE	State NC	Zip Code 28739-6977
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer RETIRED	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. CHARLES RAY MOUNTS		Date of Receipt 12 / 29 / 2011 Transaction ID : SA11.4990
Mailing Address 840 CIMA LINDA LANE		Amount of Each Receipt this Period 250.00
City MONTECITO	State CA	Zip Code 93108-1815
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer KNIGHT	Occupation FINANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. JOHN L. NAU III		Date of Receipt 12 / 08 / 2011 Transaction ID : SA11.4825
Mailing Address P.O. BOX 130130		Amount of Each Receipt this Period 100000.00
City HOUSTON	State TX	Zip Code 77219-0130
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer SILVER EAGLE DISTRIBUTORS, L.P.	Occupation C.E.O	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

SUBTOTAL of Receipts This Page (optional).....▶	100500.00
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 27 OF 146
	<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

Full Name (Last, First, Middle Initial) A. JON E. NIX		Date of Receipt 10 / 21 / 2011 Transaction ID : SA11.4570
Mailing Address 222 LAKEVIEW AVE STE. 1660		Amount of Each Receipt this Period 5000.00
City WEST PALM BEACH	State FL	Zip Code 33401-6174
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer NIX VENTURE PARTNERS	Occupation OWNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. MICHAEL NOVELLI		Date of Receipt 12 / 29 / 2011 Transaction ID : SA11.4995
Mailing Address 42 PALMER CREST COURT		Amount of Each Receipt this Period 500.00
City THE WOODLANDS	State TX	Zip Code 77381-4209
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer CYPRESSBROOK COMPANY	Occupation REAL ESTATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) C. JENNIFER N. OWENS		Date of Receipt 12 / 29 / 2011 Transaction ID : SA11.5001
Mailing Address 967 CASIANO ROAD		Amount of Each Receipt this Period 250.00
City LOS ANGELES	State CA	Zip Code 90049-1607
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer CREDIT SUISSE	Occupation AVP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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: (check only one)	PAGE 28 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Crossroads

A. CHRISTOPHER RANDOLPH
 Full Name (Last, First, Middle Initial)
 Mailing Address 2784 MARSHALL LAKE DRIVE
 City OAKTON State VA Zip Code 22124-1148
 FEC ID number of contributing federal political committee. **C**
 Name of Employer OPTIMUM OPTICAL Occupation BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 12 / 28 / 2011
Transaction ID : SA11.4901
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. HARRY WILLIAM ROLLINS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5378 BLACK LANE
 City FAIRBORN State OH Zip Code 45324-8823
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ROLLINS M&S Occupation OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 12 / 31 / 2011
Transaction ID : SA11.5033
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

C. WILLIAM RYAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 7073 N. MASON
 City CHICAGO State IL Zip Code 60646-1224
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SCANDAGLIA & RYAN Occupation ATTORNEY
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 04 / 2011
Transaction ID : SA11.4558
 Amount of Each Receipt this Period 1000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	2250.00
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 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. MARY ANNE SAKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9330 TRIANA TER APT 4
 City State Zip Code
 FT. MYERS FL 33912-0929
 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 M / D D D / Y Y Y Y Y Y
 11 / 11 / 2011
Transaction ID : SA11.4809
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. MARY ANNE SAKSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 9330 TRIANA TER APT 4
 City State Zip Code
 FT. MYERS FL 33912-0929
 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 M / D D D / Y Y Y Y Y Y
 12 / 23 / 2011
Transaction ID : SA11.4895
 Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. JONATHAN SCANLON
 Full Name (Last, First, Middle Initial)
 Mailing Address 331 CANTERWOOD LANE
 City State Zip Code
 GREAT FALLS VA 22066-1126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 WINSTON PARTNERS INVESTMENT MANAGER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 750.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 19 / 2011
Transaction ID : SA11.4866
 Amount of Each Receipt this Period
 750.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 1250.00
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 30 OF 146
	<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. THOMAS H. SHRAGER
Full Name (Last, First, Middle Initial)

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 BROWNE Occupation ANALYST

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 9000.00

Date of Receipt 12 / 28 / 2011
Transaction ID : SA11.4923

Amount of Each Receipt this Period 9000.00

CONTRIBUTION

B. HAROLD C. SIMMONS
Full Name (Last, First, Middle Initial)

Mailing Address 5430 LBJ FWY STE. 1700

City DALLAS State TX Zip Code 75240-2620

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

Name of Employer CONTRAN CORPORATION Occupation OWNER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000000.00

Date of Receipt 11 / 29 / 2011
Transaction ID : SA11.4819

Amount of Each Receipt this Period 5000000.00

CONTRIBUTION

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

Mailing Address 1545 SWEET ROAD

City EAST AURORA State NY Zip Code 14052-3048

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 ▼ 250.00

Date of Receipt 12 / 28 / 2011
Transaction ID : SA11.4941

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 5009250.00

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 31 OF 146
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. JAMES STANARD
Full Name (Last, First, Middle Initial)

Mailing Address 15 LINDEN LANE

City CHATHAM State NJ Zip Code 07928-1623

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

Name of Employer Occupation
INFO REQUESTED INFO REQUESTED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
12 / 17 / 2011
Transaction ID : SA11.4863

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

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

Mailing Address 2655 SW 164TH PL

City BURIEEN State WA Zip Code 98166-3123

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
12 / 28 / 2011
Transaction ID : SA11.4939

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address P.O. BOX 2196

City SAINT AUGUSTINE State FL Zip Code 32085-2196

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

Name of Employer Occupation
JOHN SUNDEMAN CPA PA CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 28 / 2011
Transaction ID : SA11.4952

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 146
	<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

Full Name (Last, First, Middle Initial)
A. TOM SWALL

Mailing Address 13518 AVE. 248

City TULARE State CA Zip Code 93274-9336

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

Name of Employer SELF Occupation FARMER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 31 / 2011

Transaction ID : SA11.5017

Amount of Each Receipt this Period
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. KENNY A. TROUTT

Mailing Address 5956 SHERRY LANE SUITE 1350

City DALLAS State TX Zip Code 75225-8009

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

Name of Employer MT. VERNON INVESTMENTS L.P. Occupation C.E.O.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2011

Transaction ID : SA11.4573

Amount of Each Receipt this Period
500000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MARK WHELESS

Mailing Address 5224 TAYLOR CREEK RD

City AFTON State VA Zip Code 22920-2910

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
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2011

Transaction ID : SA11.5088

Amount of Each Receipt this Period
500.00

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: (check only one)	PAGE 33 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. KIM WHITE

Mailing Address 201 E. 62ND STREET
APT. 15B

City NEW YORK State NY Zip Code 10065-7691

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

Name of Employer MOORE CAPITAL Occupation FINANCE EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2011

Transaction ID : SA11.4867

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MARK WILLIAMS

Mailing Address 9 SALT MARSH COVE

City BEAUFORT State SC Zip Code 29907-2039

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 ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 27 / 2011

Transaction ID : SA11.5089

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 684 FOX RUN

City ORINDA State CA Zip Code 94563-2420

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
 M M M / D D D / Y Y Y Y Y Y
 12 / 29 / 2011

Transaction ID : SA11.4997

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	6500.00
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 OF 146
	(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"/> 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. SUSAN P. WOLZ
Full Name (Last, First, Middle Initial)

Mailing Address 440 W. ALDINE AVE
#1E

City CHICAGO State IL Zip Code 60657-3633

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

Name of Employer LATHAM & WATKINS Occupation ADMINISTRATOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
12 / 30 / 2011
Transaction ID : SA11.5004

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. SAMUEL ZELL
Full Name (Last, First, Middle Initial)

Mailing Address 2 N. RIVERSIDE PLAZA
STE. 600

City CHICAGO State IL Zip Code 60606-2627

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

Name of Employer EQUITY INTERNATIONAL Occupation FOUNDER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
10 / 11 / 2011
Transaction ID : SA11.4566

Amount of Each Receipt this Period
100000.00

CONTRIBUTION

C. ALLIANCE MANAGEMENT HOLDINGS
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 22027

City TULSA State OK Zip Code 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 ▼
425000.00

Date of Receipt
12 / 28 / 2011
Transaction ID : SA11.4962

Amount of Each Receipt this Period
425000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 525250.00

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 35 OF 146
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. ALPHA NATURAL RESOURCES, LLC		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2011
Mailing Address P.O. BOX 2345		Transaction ID : SA11.4568
City ABINGDON	State VA	Zip Code 24212-2345
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100000.00
Name of Employer		CONTRIBUTION
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name (Last, First, Middle Initial) B. CHARLENE NEAL PURESTYLE, INC.		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 29 / 2011
Mailing Address 8141 LAKEWOOD MAIN STREET SUITE 212		Transaction ID : SA11.4963
City LAKEWOOD RANCH	State FL	Zip Code 34202-5059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25000.00
Name of Employer		CONTRIBUTION
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) C. CONTRAN CORPORATION		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 21 / 2011
Mailing Address THREE LINCOLN CENTER STE. 1700 5430 L.B.J FREEWAY		Transaction ID : SA11.4567
City DALLAS	State TX	Zip Code 75240
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000000.00
Name of Employer		CONTRIBUTION
Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000000.00	

SUBTOTAL of Receipts This Page (optional).....▶	1125000.00
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 36 OF 146
	<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. CONTRAN CORPORATION
 Full Name (Last, First, Middle Initial)
 Mailing Address **THREE LINCOLN CENTER**
STE. 1700 5430 L.B.J FREEWAY
 City State Zip Code
DALLAS TX 75240
 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
10 / 26 / 2011
Transaction ID : SA11.4571
 Amount of Each Receipt this Period
1000000.00
CONTRIBUTION

B. CROW HOLDINGS, L.L.C. - DISTRIBUTION
 Full Name (Last, First, Middle Initial)
 Mailing Address **3819 MAPLE AVENUE**
 City State Zip Code
DALLAS TX 75219-3913
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
500000.00

Date of Receipt
11 / 18 / 2011
Transaction ID : SA11.4578
 Amount of Each Receipt this Period
500000.00
CONTRIBUTION

C. HUBBARD BROADCASTING, INC.
 Full Name (Last, First, Middle Initial)
 Mailing Address **3415 UNIVERSITY AVE**
 City State Zip Code
ST. PAUL MN 55114-1019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
100000.00

Date of Receipt
11 / 29 / 2011
Transaction ID : SA11.4697
 Amount of Each Receipt this Period
100000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1600000.00
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 37 OF 146
	<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

Full Name (Last, First, Middle Initial)
A. LEAGUE OF AMERICAN VOTERS, INC.

Mailing Address 722 12TH STREET NW
FLOOR 4

City WASHINGTON State DC Zip Code 20005-3966

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt
12 / 12 / 2011
Transaction ID : SA11.4827

Amount of Each Receipt this Period
25000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. STEPHENS INVESTMENTS HOLDINGS L.L.C

Mailing Address 111 CENTER ST.

City LITTLE ROCK State AR Zip Code 72201-4402

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
12 / 21 / 2011
Transaction ID : SA11.4875

Amount of Each Receipt this Period
250000.00

CONTRIBUTION

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

Mailing Address 9850 WESTPOINT DRIVE
STE. 100

City INDIANAPOLIS State IN Zip Code 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 ▼
400000.00

Date of Receipt
11 / 04 / 2011
Transaction ID : SA11.4574

Amount of Each Receipt this Period
200000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	475000.00
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 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. WHITECO INDUSTRIES, INC.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1000 E. 80TH PLACE
 STE. 700 N
 City State Zip Code
 MERRILLVILLE IN 46410-5608
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1000000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 15 / 2011
Transaction ID : SA11.4577
 Amount of Each Receipt this Period
 1000000.00
CONTRIBUTION

B.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

C.
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	1000000.00
TOTAL This Period (last page this line number only).....▶	11673600.00

**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 39 OF 146
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial) A. AT&T INC. FEDERAL PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 22 / 2011
Mailing Address 1133 21ST STREET, NW STE. 900		Transaction ID : SA11.4873
City WASHINGTON State DC Zip Code 20036-3333	FEC ID number of contributing federal political committee. C C00109017	Amount of Each Receipt this Period 5000.00
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	CONTRIBUTION
Aggregate Year-to-Date ▼ 5000.00		

Full Name (Last, First, Middle Initial) B.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼		

Full Name (Last, First, Middle Initial) C.		Date of Receipt M M / D D / Y Y Y Y Y Y
Mailing Address		Amount of Each Receipt this Period
City State Zip Code	FEC ID number of contributing federal political committee. C	
Name of Employer Occupation	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Aggregate Year-to-Date ▼		

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

**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

Full Name (Last, First, Middle Initial)

A. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : SB21B.I731

Amount of Each Disbursement this Period

195.00

Full Name (Last, First, Middle Initial)

B. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2011

Transaction ID : SB21B.I732

Amount of Each Disbursement this Period

1102.14

Full Name (Last, First, Middle Initial)

C. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.I733

Amount of Each Disbursement this Period

1101.47

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

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

2398.61

**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

Full Name (Last, First, Middle Initial)

A. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21B.I734

Amount of Each Disbursement this Period

1101.48

Full Name (Last, First, Middle Initial)

B. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I735

Amount of Each Disbursement this Period

1101.17

Full Name (Last, First, Middle Initial)

C. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I736

Amount of Each Disbursement this Period

1101.16

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

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

3303.81

**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

Full Name (Last, First, Middle Initial)

A. GREGORY CAREY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I737

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I738

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I739

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

Full Name (Last, First, Middle Initial)

A. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21B.I740

Amount of Each Disbursement this Period

2027.76

Full Name (Last, First, Middle Initial)

B. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I741

Amount of Each Disbursement this Period

1423.75

Full Name (Last, First, Middle Initial)

C. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B.I742

Amount of Each Disbursement this Period

578.28

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

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

4029.79

**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

Full Name (Last, First, Middle Initial)

A. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I743

Amount of Each Disbursement this Period

1423.74

Full Name (Last, First, Middle Initial)

B. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : SB21B.I744

Amount of Each Disbursement this Period

1423.75

Full Name (Last, First, Middle Initial)

C. JONATHAN COLLEGIO

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : SB21B.I745

Amount of Each Disbursement this Period

1453.34

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

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

4300.83

**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

Full Name (Last, First, Middle Initial)

A. CALEB CROSBY

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTIAN BROOK State AL Zip Code 35223

Purpose of Disbursement
BOOKKEEPING AND COMPLIANCE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : SB21B.I746

Amount of Each Disbursement this Period

4518.88

Full Name (Last, First, Middle Initial)

B. CALEB CROSBY

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTIAN BROOK State AL Zip Code 35223

Purpose of Disbursement
BOOKKEEPING AND COMPLIANCE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : SB21B.I778

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. CALEB CROSBY

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTIAN BROOK State AL Zip Code 35223

Purpose of Disbursement
BOOKKEEPING AND COMPLIANCE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B.I779

Amount of Each Disbursement this Period

4326.56

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

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

12845.44

**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

Full Name (Last, First, Middle Initial)

A. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2011

Transaction ID : **SB21B.I780**

Amount of Each Disbursement this Period

778.97

Full Name (Last, First, Middle Initial)

B. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : **SB21B.I781**

Amount of Each Disbursement this Period

768.21

Full Name (Last, First, Middle Initial)

C. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : **SB21B.I782**

Amount of Each Disbursement this Period

768.20

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

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

2315.38

**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

Full Name (Last, First, Middle Initial)

A. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I783

Amount of Each Disbursement this Period

767.76

Full Name (Last, First, Middle Initial)

B. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I784

Amount of Each Disbursement this Period

767.77

Full Name (Last, First, Middle Initial)

C. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : SB21B.I785

Amount of Each Disbursement this Period

767.76

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

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

2303.29

**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

Full Name (Last, First, Middle Initial)

A. JENNIFER FAY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : **SB21B.I786**

Amount of Each Disbursement this Period

1370.74

Full Name (Last, First, Middle Initial)

B. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
BOOKKEEPING AND COMPLIANCE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2011

Transaction ID : **SB21B.I787**

Amount of Each Disbursement this Period

1597.22

Full Name (Last, First, Middle Initial)

C. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2011

Transaction ID : **SB21B.I788**

Amount of Each Disbursement this Period

1742.39

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

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

4710.35

**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

Full Name (Last, First, Middle Initial)

A. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PETTY CASH

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2011

Transaction ID : SB21B.I789

Amount of Each Disbursement this Period

200.00

Full Name (Last, First, Middle Initial)

B. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : SB21B.I790

Amount of Each Disbursement this Period

1731.61

Full Name (Last, First, Middle Initial)

C. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : SB21B.I791

Amount of Each Disbursement this Period

1731.62

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

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

3663.23

**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

Full Name (Last, First, Middle Initial)

A. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : SB21B.I792

Amount of Each Disbursement this Period

1731.56

Full Name (Last, First, Middle Initial)

B. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B.I793

Amount of Each Disbursement this Period

1731.57

Full Name (Last, First, Middle Initial)

C. HEATHER HENDERSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SB21B.I794

Amount of Each Disbursement this Period

1731.57

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

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

5194.70

**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

Full Name (Last, First, Middle Initial)

A. NATHAN HODSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2011

Transaction ID : SB21B.I795

Amount of Each Disbursement this Period

323.35

Full Name (Last, First, Middle Initial)

B. NATHAN HODSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : SB21B.I796

Amount of Each Disbursement this Period

447.68

Full Name (Last, First, Middle Initial)

C. NATHAN HODSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : SB21B.I797

Amount of Each Disbursement this Period

487.47

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

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

1258.50

**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

Full Name (Last, First, Middle Initial)

A. NATHAN HODSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : SB21B.I798

Amount of Each Disbursement this Period

487.67

Full Name (Last, First, Middle Initial)

B. NATHAN HODSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B.I799

Amount of Each Disbursement this Period

487.66

Full Name (Last, First, Middle Initial)

C. NATHAN HODSON

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SB21B.I800

Amount of Each Disbursement this Period

487.67

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

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

1463.00

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

Full Name (Last, First, Middle Initial)

A. BARRET KEDZIOR

Mailing Address 3040 NORTH SHEFFIELD, #2

City CHICAGO State IL Zip Code 60657

Purpose of Disbursement
REIMBURSEMENT MEETING EXPENSE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2011

Transaction ID : SB21B.I801

Amount of Each Disbursement this Period

325.78

Full Name (Last, First, Middle Initial)

B. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT, MEALS / TRAVEL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2011

Transaction ID : SB21B.I802

Amount of Each Disbursement this Period

324.84

Full Name (Last, First, Middle Initial)

C. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2011

Transaction ID : SB21B.I803

Amount of Each Disbursement this Period

3265.09

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

3915.71

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : SB21B.I804

Amount of Each Disbursement this Period

3239.32

Full Name (Last, First, Middle Initial)

B. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT, MEALS / TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2011

Transaction ID : SB21B.I805

Amount of Each Disbursement this Period

151.97

Full Name (Last, First, Middle Initial)

C. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : SB21B.I806

Amount of Each Disbursement this Period

3737.33

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

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

7128.62

**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

Full Name (Last, First, Middle Initial)

A. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT, TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2011

Transaction ID : SB21B.I807

Amount of Each Disbursement this Period

27.50

Full Name (Last, First, Middle Initial)

B. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : SB21B.I808

Amount of Each Disbursement this Period

3239.45

Full Name (Last, First, Middle Initial)

C. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B.I809

Amount of Each Disbursement this Period

3239.45

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

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

6506.40

**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

Full Name (Last, First, Middle Initial)

A. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT, MEALS / TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : **SB21B.I810**

Amount of Each Disbursement this Period

275.85

Full Name (Last, First, Middle Initial)

B. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT, MEALS

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 21 / 2011

Transaction ID : **SB21B.I811**

Amount of Each Disbursement this Period

209.19

Full Name (Last, First, Middle Initial)

C. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : **SB21B.I812**

Amount of Each Disbursement this Period

3239.45

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

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

3724.49

**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

Full Name (Last, First, Middle Initial)

A. STEVEN LAW

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SB21B.I813

Amount of Each Disbursement this Period

15873.83

Full Name (Last, First, Middle Initial)

B. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2011

Transaction ID : SB21B.I814

Amount of Each Disbursement this Period

2440.02

Full Name (Last, First, Middle Initial)

C. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : SB21B.I815

Amount of Each Disbursement this Period

2430.23

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

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

20744.08

**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

Full Name (Last, First, Middle Initial)

A. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I816

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I817

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I818

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

Full Name (Last, First, Middle Initial)

A. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : **SB21B.I819**

Amount of Each Disbursement this Period

2429.79

Full Name (Last, First, Middle Initial)

B. AMY LEEDECKE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : **SB21B.I820**

Amount of Each Disbursement this Period

3867.22

Full Name (Last, First, Middle Initial)

C. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2011

Transaction ID : **SB21B.I821**

Amount of Each Disbursement this Period

3954.58

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

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

10251.59

**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

Full Name (Last, First, Middle Initial)

A. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.I822

Amount of Each Disbursement this Period

4118.61

Full Name (Last, First, Middle Initial)

B. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : SB21B.I823

Amount of Each Disbursement this Period

200.30

Full Name (Last, First, Middle Initial)

C. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21B.I824

Amount of Each Disbursement this Period

4187.20

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

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

8506.11

**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

Full Name (Last, First, Middle Initial)

A. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I825

Amount of Each Disbursement this Period

4183.80

Full Name (Last, First, Middle Initial)

B. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I826

Amount of Each Disbursement this Period

4183.80

Full Name (Last, First, Middle Initial)

C. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I827

Amount of Each Disbursement this Period

157.00

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

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

8524.60

**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

Full Name (Last, First, Middle Initial)

A. CHRIS MCINERNEY

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I828

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. JOHN MILAM

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I829

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. JOHN MILAM

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I830

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

Full Name (Last, First, Middle Initial)

A. JOHN MILAM

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : **SB21B.I831**

Amount of Each Disbursement this Period

1332.10

Full Name (Last, First, Middle Initial)

B. JOHN MILAM

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : **SB21B.I832**

Amount of Each Disbursement this Period

1332.09

Full Name (Last, First, Middle Initial)

C. JOHN MILAM

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : **SB21B.I833**

Amount of Each Disbursement this Period

1332.11

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

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

3996.30

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. JOHN MILAM

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SB21B.I834

Amount of Each Disbursement this Period

1332.09

Full Name (Last, First, Middle Initial)

B. LLOYD MILLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : SB21B.I835

Amount of Each Disbursement this Period

1722.00

Full Name (Last, First, Middle Initial)

C. LLOYD MILLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : SB21B.I836

Amount of Each Disbursement this Period

1722.00

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

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

4776.09

**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

Full Name (Last, First, Middle Initial)

A. LLOYD MILLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I837

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. LLOYD MILLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I838

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. LLOYD MILLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I839

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

Full Name (Last, First, Middle Initial)

A. ANDREW MOORE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2011

Transaction ID : **SB21B.I840**

Amount of Each Disbursement this Period

1166.26

Full Name (Last, First, Middle Initial)

B. ANDREW MOORE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : **SB21B.I841**

Amount of Each Disbursement this Period

1166.60

Full Name (Last, First, Middle Initial)

C. ANDREW MOORE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : **SB21B.I842**

Amount of Each Disbursement this Period

1165.29

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

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

3497.15

**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

Full Name (Last, First, Middle Initial)

A. ANDREW MOORE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I843

Amount of Each Disbursement this Period

1165.29

Full Name (Last, First, Middle Initial)

B. ANDREW MOORE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I844

Amount of Each Disbursement this Period

1165.28

Full Name (Last, First, Middle Initial)

C. ANDREW MOORE

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : SB21B.I845

Amount of Each Disbursement this Period

1165.29

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

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

3495.86

**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)

<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

Full Name (Last, First, Middle Initial)

A. PAUL MOUTON

Mailing Address P.O. BOX 545

City CARTHAGE State MO Zip Code 64836

Purpose of Disbursement
CONSULTING, RESEARCH

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2011

Transaction ID : SB21B.I846

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. PAUL MOUTON

Mailing Address P.O. BOX 545

City CARTHAGE State MO Zip Code 64836

Purpose of Disbursement
CONSULTING, RESEARCH

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB21B.I847

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. JENNIFER MUELLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2011

Transaction ID : SB21B.I848

Amount of Each Disbursement this Period

1419.18

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

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

11419.18

**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

Full Name (Last, First, Middle Initial)

A. JENNIFER MUELLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I849

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. JENNIFER MUELLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I850

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. JENNIFER MUELLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.I851

Amount of Each Disbursement this Period

Category/
Type

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

Full Name (Last, First, Middle Initial)

A. JENNIFER MUELLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I852**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. JENNIFER MUELLER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I853**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB21B.I854**

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

Full Name (Last, First, Middle Initial)

A. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : SB21B.I855

Amount of Each Disbursement this Period

296.68

Full Name (Last, First, Middle Initial)

B. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2011

Transaction ID : SB21B.I856

Amount of Each Disbursement this Period

271.79

Full Name (Last, First, Middle Initial)

C. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : SB21B.I857

Amount of Each Disbursement this Period

321.53

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

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

890.00

**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

Full Name (Last, First, Middle Initial)

A. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
VOID CHECK

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2011

Transaction ID : SB21B.I858

Amount of Each Disbursement this Period

542.47

Full Name (Last, First, Middle Initial)

B. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I859

Amount of Each Disbursement this Period

297.13

Full Name (Last, First, Middle Initial)

C. KELLY NALLEN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : SB21B.I860

Amount of Each Disbursement this Period

297.14

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

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

542.47

542.47

**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

Full Name (Last, First, Middle Initial)

A. ANNA ROGERS

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I861

Amount of Each Disbursement this Period

1593.59

Full Name (Last, First, Middle Initial)

B. ANNA ROGERS

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I862

Amount of Each Disbursement this Period

1388.44

Full Name (Last, First, Middle Initial)

C. ANNA ROGERS

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
REIMBURSEMENT, MEETING EXP / TRAVEL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 20 / 2011

Transaction ID : SB21B.I863

Amount of Each Disbursement this Period

542.36

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

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

3524.39

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

Full Name (Last, First, Middle Initial)

A. ANNA ROGERS

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : SB21B.I864

Amount of Each Disbursement this Period

1388.44

Full Name (Last, First, Middle Initial)

B. KYLE SISENSTEIN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2011

Transaction ID : SB21B.I865

Amount of Each Disbursement this Period

1125.26

Full Name (Last, First, Middle Initial)

C. KYLE SISENSTEIN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.I866

Amount of Each Disbursement this Period

1124.60

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

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

3638.30

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. KYLE SISENSTEIN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : **SB21B.I867**

Amount of Each Disbursement this Period

1124.59

Full Name (Last, First, Middle Initial)

B. KYLE SISENSTEIN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : **SB21B.I868**

Amount of Each Disbursement this Period

1124.28

Full Name (Last, First, Middle Initial)

C. KYLE SISENSTEIN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB21B.I869**

Amount of Each Disbursement this Period

1124.29

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

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

3373.16

**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

Full Name (Last, First, Middle Initial)

A. KYLE SISENSTEIN

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : **SB21B.I870**

Amount of Each Disbursement this Period

1124.28

Full Name (Last, First, Middle Initial)

B. THEODORE TANZER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2011

Transaction ID : **SB21B.I871**

Amount of Each Disbursement this Period

1241.93

Full Name (Last, First, Middle Initial)

C. THEODORE TANZER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2011

Transaction ID : **SB21B.I872**

Amount of Each Disbursement this Period

1241.21

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

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

3607.42

**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

Full Name (Last, First, Middle Initial)

A. THEODORE TANZER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21B.I873

Amount of Each Disbursement this Period

1241.21

Full Name (Last, First, Middle Initial)

B. THEODORE TANZER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I874

Amount of Each Disbursement this Period

1241.65

Full Name (Last, First, Middle Initial)

C. THEODORE TANZER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I875

Amount of Each Disbursement this Period

1241.65

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

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

3724.51

**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

Full Name (Last, First, Middle Initial)

A. THEODORE TANZER

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : SB21B.I876

Amount of Each Disbursement this Period

1241.65

Full Name (Last, First, Middle Initial)

B. MATTHEW WALL

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2011

Transaction ID : SB21B.I877

Amount of Each Disbursement this Period

1629.75

Full Name (Last, First, Middle Initial)

C. MATTHEW WALL

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.I878

Amount of Each Disbursement this Period

1628.22

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

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

4499.62

**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

Full Name (Last, First, Middle Initial)

A. MATTHEW WALL

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : **SB21B.I879**

Amount of Each Disbursement this Period

1628.21

Full Name (Last, First, Middle Initial)

B. MATTHEW WALL

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : **SB21B.I880**

Amount of Each Disbursement this Period

1627.73

Full Name (Last, First, Middle Initial)

C. MATTHEW WALL

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB21B.I881**

Amount of Each Disbursement this Period

1627.73

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

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

4883.67

**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

Full Name (Last, First, Middle Initial)

A. MATTHEW WALL

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
PAYROLL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SB21B.I882

Amount of Each Disbursement this Period

1627.73

Full Name (Last, First, Middle Initial)

B. ACCION INTERNATIONAL

Mailing Address 56 ROLAND STREET, STE 300

City BOSTON State MA Zip Code 02129

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2011

Transaction ID : SB21B.I883

Amount of Each Disbursement this Period

8100.00

Full Name (Last, First, Middle Initial)

C. ACCION INTERNATIONAL

Mailing Address 56 ROLAND STREET, STE 300

City BOSTON State MA Zip Code 02129

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 03 / 2011

Transaction ID : SB21B.I884

Amount of Each Disbursement this Period

3600.00

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

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

13327.73

**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

Full Name (Last, First, Middle Initial)

A. ACCION INTERNATIONAL

Mailing Address 56 ROLAND STREET, STE 300

City BOSTON State MA Zip Code 02129

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I885

Amount of Each Disbursement this Period

3600.00

Full Name (Last, First, Middle Initial)

B. ADFERO GROUP LLC

Mailing Address 1666 K STREET NW, STE 250

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
PRINTING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 20 / 2011

Transaction ID : SB21B.I886

Amount of Each Disbursement this Period

5263.08

Full Name (Last, First, Middle Initial)

C. ADP INC

Mailing Address 504 CLINTON CENTER DRIVE, STE 4400

City CLINTON State MS Zip Code 39056

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : SB21B.I887

Amount of Each Disbursement this Period

134.25

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

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

8997.33

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. ADP INC

Mailing Address 504 CLINTON CENTER DRIVE, STE 4400

City CLINTON State MS Zip Code 39056

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2011

Transaction ID : SB21B.I888

Amount of Each Disbursement this Period

127.25

Category/
Type

Full Name (Last, First, Middle Initial)

B. ADP INC

Mailing Address 504 CLINTON CENTER DRIVE, STE 4400

City CLINTON State MS Zip Code 39056

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : SB21B.I889

Amount of Each Disbursement this Period

118.25

Category/
Type

Full Name (Last, First, Middle Initial)

C. ALLIED TELECOM

Mailing Address 1120 20TH ST., NW, STE 500-S
STE. 500-S

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
INTERNET AND TELEPHONE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2011

Transaction ID : SB21B.I890

Amount of Each Disbursement this Period

3277.82

Category/
Type

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

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

3523.32

**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

Full Name (Last, First, Middle Initial)

A. ALLIED TELECOM

Mailing Address 1120 20TH ST., NW, STE 500-S
STE. 500-S

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
INTERNET AND TELEPHONE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : **SB21B.I891**

Amount of Each Disbursement this Period

1651.37

Full Name (Last, First, Middle Initial)

B. AMERICAN ACTION NETWORK

Mailing Address 1730 PENNSYLVANIA AVE, STE 525

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
OFFICE RENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 13 / 2011

Transaction ID : **SB21B.I892**

Amount of Each Disbursement this Period

8332.72

Full Name (Last, First, Middle Initial)

C. ARENA

Mailing Address 1780 W. SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement
POSTAGE, PRINTING / PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : **SB21B.I893**

Amount of Each Disbursement this Period

2131.00

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

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

12115.09

**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

Full Name (Last, First, Middle Initial)

A. ATCHLEY & ASSOCIATES

Mailing Address 6850 AUSTIN CENTER BLVD, STE 180

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2011

Transaction ID : SB21B.I894

Amount of Each Disbursement this Period

6244.25

Full Name (Last, First, Middle Initial)

B. ATCHLEY & ASSOCIATES

Mailing Address 6850 AUSTIN CENTER BLVD, STE 180

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB21B.I895

Amount of Each Disbursement this Period

5700.50

Full Name (Last, First, Middle Initial)

C. BLACK ROCK GROUP LLC

Mailing Address 66 CANAL CENTER PLAZA, STE 555
STE. 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING ADVOCACY COMMUNICATION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2011

Transaction ID : SB21B.I896

Amount of Each Disbursement this Period

3064.00

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

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

15008.75

**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

Full Name (Last, First, Middle Initial)

A. BLACK ROCK GROUP LLC

Mailing Address 66 CANAL CENTER PLAZA, STE 555
STE. 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING ADVOCACY COMMUNICATION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 10 / 2011

Transaction ID : **SB21B.I897**

Amount of Each Disbursement this Period

4067.98

Full Name (Last, First, Middle Initial)

B. BLACK ROCK GROUP LLC

Mailing Address 66 CANAL CENTER PLAZA, STE 555
STE. 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING ADVOCACY COMMUNICATION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB21B.I898**

Amount of Each Disbursement this Period

4525.45

Full Name (Last, First, Middle Initial)

C. BROOK FURNITURE RENTAL

Mailing Address 24997 NETWORK PLACE

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement
OFFICE FURNITURE RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 13 / 2011

Transaction ID : **SB21B.I899**

Amount of Each Disbursement this Period

634.84

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

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

9228.27

**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

Full Name (Last, First, Middle Initial)

A. BROOK FURNITURE RENTAL

Mailing Address 24997 NETWORK PLACE

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement
OFFICE FURNITURE RENTAL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2011

Transaction ID : **SB21B.I900**

Amount of Each Disbursement this Period

634.84

Full Name (Last, First, Middle Initial)

B. BROOK FURNITURE RENTAL

Mailing Address 24997 NETWORK PLACE

City CHICAGO State IL Zip Code 60673

Purpose of Disbursement
OFFICE FURNITURE RENTAL

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB21B.I901**

Amount of Each Disbursement this Period

634.84

Full Name (Last, First, Middle Initial)

C. CAPITOL COMPUTER EXPERTS

Mailing Address 9700-G MARTIN LUTHER KING JR. HIGH

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECHNICAL SUPPORT / EQUIPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : **SB21B.I902**

Amount of Each Disbursement this Period

3507.19

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

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

4776.87

**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

Full Name (Last, First, Middle Initial)

A. CAPITOL COMPUTER EXPERTS

Mailing Address 9700-G MARTIN LUTHER KING JR. HIGH

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECHNICAL SUPPORT

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District: 00

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2011

Transaction ID : **SB21B.I903**

Amount of Each Disbursement this Period

757.90

Full Name (Last, First, Middle Initial)

B. CAPITOL COMPUTER EXPERTS

Mailing Address 9700-G MARTIN LUTHER KING JR. HIGH

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECHNICAL SUPPORT

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District: 00

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : **SB21B.I904**

Amount of Each Disbursement this Period

349.27

Full Name (Last, First, Middle Initial)

C. CAPITOL COMPUTER EXPERTS

Mailing Address 9700-G MARTIN LUTHER KING JR. HIGH

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECHNICAL SUPPORT

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District: 00

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2011

Transaction ID : **SB21B.I905**

Amount of Each Disbursement this Period

137.80

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

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

1244.97

**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

Full Name (Last, First, Middle Initial)

A. CAPITOL COMPUTER EXPERTS

Mailing Address 9700-G MARTIN LUTHER KING JR. HIGH

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECHNICAL SUPPORT / EQUIPMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		08		2011

Transaction ID : SB21B.I906

Amount of Each Disbursement this Period

7195.40

Full Name (Last, First, Middle Initial)

B. CAPITOL COMPUTER EXPERTS

Mailing Address 9700-G MARTIN LUTHER KING JR. HIGH

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECHNICAL SUPPORT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		19		2011

Transaction ID : SB21B.I907

Amount of Each Disbursement this Period

275.60

Full Name (Last, First, Middle Initial)

C. CAREFIRST BCBS

Mailing Address P.O. BOX 79749

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2011

Transaction ID : SB21B.I908

Amount of Each Disbursement this Period

6918.00

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

14389.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

A. CAREFIRST BCBS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 79749

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 10 / 28 / 2011

Transaction ID : **SB21B.I909**

Amount of Each Disbursement this Period: 3585.00

B. CAREFIRST BCBS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 79749

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 12 / 08 / 2011

Transaction ID : **SB21B.I910**

Amount of Each Disbursement this Period: 7461.00

C. CAREFIRST BCBS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 79749

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement HEALTH INSURANCE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 12 / 19 / 2011

Transaction ID : **SB21B.I911**

Amount of Each Disbursement this Period: 6180.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 17226.00

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

Full Name (Last, First, Middle Initial)

A. CFL ASSOCIATES

Mailing Address 4189 S FOUR MILE RUN DRIVE #404

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : SB21B.I912

Amount of Each Disbursement this Period

2000.00

Category/Type

Full Name (Last, First, Middle Initial)

B. CFL ASSOCIATES

Mailing Address 4189 S FOUR MILE RUN DRIVE #404

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B.I913

Amount of Each Disbursement this Period

4000.00

Category/Type

Full Name (Last, First, Middle Initial)

C. CFL ASSOCIATES

Mailing Address 4189 S FOUR MILE RUN DRIVE #404

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I914

Amount of Each Disbursement this Period

75.00

Category/Type

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

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

6075.00

**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

Full Name (Last, First, Middle Initial)

A. CLARK SCHAEFER HACKETT

Mailing Address 160 NORTH BREIEL BLVD.

City MIDDLETON State OH Zip Code 45042

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 15 / 2011

Transaction ID : SB21B.I915

Amount of Each Disbursement this Period

80.00

Full Name (Last, First, Middle Initial)

B. CLARK SCHAEFER HACKETT

Mailing Address 160 NORTH BREIEL BLVD.

City MIDDLETON State OH Zip Code 45042

Purpose of Disbursement
PAYROLL PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 15 / 2011

Transaction ID : SB21B.I916

Amount of Each Disbursement this Period

85.00

Full Name (Last, First, Middle Initial)

C. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 31 / 2011

Transaction ID : SB21B.I917

Amount of Each Disbursement this Period

1090.00

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

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

1255.00

**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

Full Name (Last, First, Middle Initial)

A. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I918

Amount of Each Disbursement this Period

218.62

Full Name (Last, First, Middle Initial)

B. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I919

Amount of Each Disbursement this Period

218.62

Full Name (Last, First, Middle Initial)

C. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 21 / 2011

Transaction ID : SB21B.I920

Amount of Each Disbursement this Period

219.00

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

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

656.24

**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

Full Name (Last, First, Middle Initial)

A. COMPTROLLER OF MARYLAND

Mailing Address STATE INCOME TAX BLDG

City ANNAPOLIS State MD Zip Code 21411

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : **SB21B.I921**

Amount of Each Disbursement this Period

218.62

Category/
Type

Full Name (Last, First, Middle Initial)

B. CROSSROADS MEDIA LLC

Mailing Address 66 CANAL CENTER PLAZA, SUITE 555
STE. 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MEDIA PLACEMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : **SB21B.I922**

Amount of Each Disbursement this Period

64135.21

Category/
Type

Full Name (Last, First, Middle Initial)

C. CROSSROADS MEDIA LLC

Mailing Address 66 CANAL CENTER PLAZA, SUITE 555
STE. 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MEDIA PLACEMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2011

Transaction ID : **SB21B.I923**

Amount of Each Disbursement this Period

36923.86

Category/
Type

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

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

101277.69

**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

Full Name (Last, First, Middle Initial)

A. CROSSROADS MEDIA LLC

Mailing Address 66 CANAL CENTER PLAZA, SUITE 555
STE. 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MEDIA PLACEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2011

Transaction ID : **SB21B.I924**

Amount of Each Disbursement this Period

35745.03

Full Name (Last, First, Middle Initial)

B. CROSSROADS MEDIA LLC

Mailing Address 66 CANAL CENTER PLAZA, SUITE 555
STE. 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
MEDIA PLACEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2011

Transaction ID : **SB21B.I925**

Amount of Each Disbursement this Period

41175.10

Full Name (Last, First, Middle Initial)

C. CWPS

Mailing Address 14120-A SULLYFIELD CIRCLE

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement
OFFICE EQUIPMENT PURCHASE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB21B.I926**

Amount of Each Disbursement this Period

280.70

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

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

77200.83

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF EMPLOYMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2011

Mailing Address P.O. BOX 9664

Transaction ID : SB21B.I928

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

1285.06

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Full Name (Last, First, Middle Initial)

B. DEPARTMENT OF EMPLOYMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		30		2011

Mailing Address P.O. BOX 9664

Transaction ID : SB21B.I929

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

317.07

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Full Name (Last, First, Middle Initial)

C. DEPARTMENT OF EMPLOYMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2011

Mailing Address P.O. BOX 9664

Transaction ID : SB21B.I930

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

191.80

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

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

1793.93

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. DEPARTMENT OF EMPLOYMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2011

Mailing Address P.O. BOX 9664

Transaction ID : SB21B.I931

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

146.27

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Full Name (Last, First, Middle Initial)

B. DEPARTMENT OF EMPLOYMENT SERVICES

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2011

Mailing Address P.O. BOX 9664

Transaction ID : SB21B.I932

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

948.93

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Full Name (Last, First, Middle Initial)

C. DIRECT MAIL PROCESSORS INC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2011

Mailing Address 1150 CONRAD COURT

Transaction ID : SB21B.I933

City HAGERSTOWN State MD Zip Code 21740

Amount of Each Disbursement this Period

520.00

Purpose of Disbursement
POSTAGE

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

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

1615.20

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. FINANCIAL AGENT

Mailing Address P.O. BOX 970030

City ST. LOUIS State MO Zip Code 63197

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2011

Transaction ID : SB21B.I935

Amount of Each Disbursement this Period

7625.86

Full Name (Last, First, Middle Initial)

B. FINANCIAL AGENT

Mailing Address P.O. BOX 970030

City ST. LOUIS State MO Zip Code 63197

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.I936

Amount of Each Disbursement this Period

7854.22

Full Name (Last, First, Middle Initial)

C. FINANCIAL AGENT

Mailing Address P.O. BOX 970030

City ST. LOUIS State MO Zip Code 63197

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21B.I937

Amount of Each Disbursement this Period

8039.01

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

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

23519.09

**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

Full Name (Last, First, Middle Initial)

A. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD, STE 270

City ST. PAUL State MN Zip Code 55128

Purpose of Disbursement
CONFERENCE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 07 / 2011

Transaction ID : SB21B.I938

Amount of Each Disbursement this Period

305.31

Full Name (Last, First, Middle Initial)

B. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD, STE 270

City ST. PAUL State MN Zip Code 55128

Purpose of Disbursement
CONFERENCE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 03 / 2011

Transaction ID : SB21B.I939

Amount of Each Disbursement this Period

65.91

Full Name (Last, First, Middle Initial)

C. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD, STE 270

City ST. PAUL State MN Zip Code 55128

Purpose of Disbursement
CONFERENCE CALLS

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 21 / 2011

Transaction ID : SB21B.I940

Amount of Each Disbursement this Period

189.47

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

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

560.69

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

Full Name (Last, First, Middle Initial)

A. FRANK PARSONS

Mailing Address P.O. BOX 791416

City State Zip Code
BALTIMORE MD 21279

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : SB21B.I941

Amount of Each Disbursement this Period

302.90

Full Name (Last, First, Middle Initial)

B. FRANK PARSONS

Mailing Address P.O. BOX 791416

City State Zip Code
BALTIMORE MD 21279

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2011

Transaction ID : SB21B.I942

Amount of Each Disbursement this Period

764.69

Full Name (Last, First, Middle Initial)

C. FRANK PARSONS

Mailing Address P.O. BOX 791416

City State Zip Code
BALTIMORE MD 21279

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2011

Transaction ID : SB21B.I943

Amount of Each Disbursement this Period

225.75

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

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

1293.34

**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

Full Name (Last, First, Middle Initial)

A. FRANK PARSONS

Mailing Address P.O. BOX 791416

City State Zip Code
BALTIMORE MD 21279

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2011

Transaction ID : SB21B.I944

Amount of Each Disbursement this Period

327.40

Full Name (Last, First, Middle Initial)

B. FRANK PARSONS

Mailing Address P.O. BOX 791416

City State Zip Code
BALTIMORE MD 21279

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB21B.I945

Amount of Each Disbursement this Period

342.13

Full Name (Last, First, Middle Initial)

C. FRANK PARSONS

Mailing Address P.O. BOX 791416

City State Zip Code
BALTIMORE MD 21279

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I946

Amount of Each Disbursement this Period

211.67

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

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

881.20

**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

Full Name (Last, First, Middle Initial)

A. GRAVITY LLC

Mailing Address 450 MASSACHUSETTS AVE NW, #1411

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement
CONSULTING, RESEARCH

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
12 / 22 / 2011

Transaction ID : SB21B.I947

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

B. GUESTBOOKER.COM LLC

Mailing Address 1204 VINTAGE GROVE LANE

City FRANKLIN State TN Zip Code 37064

Purpose of Disbursement
CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 13 / 2011

Transaction ID : SB21B.I948

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. GUESTBOOKER.COM LLC

Mailing Address 1204 VINTAGE GROVE LANE

City FRANKLIN State TN Zip Code 37064

Purpose of Disbursement
CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
11 / 03 / 2011

Transaction ID : SB21B.I949

Amount of Each Disbursement this Period

2500.00

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

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

12500.00

**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

Full Name (Last, First, Middle Initial)

A. GUESTBOOKER.COM LLC

Mailing Address 1204 VINTAGE GROVE LANE

City FRANKLIN State TN Zip Code 37064

Purpose of Disbursement
CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2011			

Transaction ID : SB21B.I950

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. HALEY O'NEILL LLC

Mailing Address P.O. BOX 16015

City ALEXANDRIA State VA Zip Code 22302

Purpose of Disbursement
CONSULTING, RESEARCH

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			20			2011			

Transaction ID : SB21B.I951

Amount of Each Disbursement this Period

14334.08

Full Name (Last, First, Middle Initial)

C. HOLTZMAN VOGEL PLLC

Mailing Address 45 NORTH HILL DRIVE, SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			13			2011			

Transaction ID : SB21B.I952

Amount of Each Disbursement this Period

32542.12

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

49376.20

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. HOLTZMAN VOGEL PLLC

Mailing Address 45 NORTH HILL DRIVE, SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2011

Transaction ID : SB21B.I953

Amount of Each Disbursement this Period

38065.82

Full Name (Last, First, Middle Initial)

B. HOLTZMAN VOGEL PLLC

Mailing Address 45 NORTH HILL DRIVE, SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement
LEGAL SERVICES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I954

Amount of Each Disbursement this Period

22124.19

Full Name (Last, First, Middle Initial)

C. HYNES COMMUNICATIONS

Mailing Address 121 BOW STREET, STE 6

City PORTSMOUTH State NH Zip Code 03801

Purpose of Disbursement
CONSULTING, COMMUNICATIONS

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B.I955

Amount of Each Disbursement this Period

8000.00

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

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

68190.01

**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

Full Name (Last, First, Middle Initial)

A. INTERFACE MEDIA GROUP

Mailing Address P.O. BOX 57138

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
DVD PRODUCTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : SB21B.I956

Amount of Each Disbursement this Period

1402.05

Full Name (Last, First, Middle Initial)

B. KINTERA BLACKBUD

Mailing Address 2000 DANIEL ISLAND DRIVE

City CHARLESTON State SC Zip Code 29492

Purpose of Disbursement
WEB SERVICE FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.I957

Amount of Each Disbursement this Period

244.87

Full Name (Last, First, Middle Initial)

C. KINTERA BLACKBUD

Mailing Address 2000 DANIEL ISLAND DRIVE

City CHARLESTON State SC Zip Code 29492

Purpose of Disbursement
WEB SERVICE FEES

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21B.I958

Amount of Each Disbursement this Period

8.17

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

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

1655.09

**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

Full Name (Last, First, Middle Initial)

A. KONICA MINOLTA BUSINESS SOLUTIONS

Mailing Address P.O. BOX 122366

City DALLAS State TX Zip Code 75312

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : **SB21B.I959**

Amount of Each Disbursement this Period

65.17

Full Name (Last, First, Middle Initial)

B. KONICA MINOLTA BUSINESS SOLUTIONS

Mailing Address P.O. BOX 122366

City DALLAS State TX Zip Code 75312

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 08 / 2011

Transaction ID : **SB21B.I960**

Amount of Each Disbursement this Period

134.77

Full Name (Last, First, Middle Initial)

C. KONICA MINOLTA BUSINESS SOLUTIONS

Mailing Address P.O. BOX 122366

City DALLAS State TX Zip Code 75312

Purpose of Disbursement
OFFICE EQUIPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 20 / 2011

Transaction ID : **SB21B.I961**

Amount of Each Disbursement this Period

600.77

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

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

800.71

**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

Full Name (Last, First, Middle Initial)

A. LEXISNEXIS

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 28 / 2011

Transaction ID : SB21B.I962

Amount of Each Disbursement this Period

2003.40

Full Name (Last, First, Middle Initial)

B. LEXISNEXIS

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I963

Amount of Each Disbursement this Period

2321.40

Full Name (Last, First, Middle Initial)

C. MCCARTHY HENNINGS MEDIA INC

Mailing Address 1850 M ST NW, SUITE 235

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
TV/MEDIA PRODUCTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I964

Amount of Each Disbursement this Period

881.16

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

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

5205.96

**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

Full Name (Last, First, Middle Initial)

A. MCKENNA & ASSOCIATES LLC

Mailing Address 2321 NORTH KENTUCKY ST.

City ARLINGTON State VA Zip Code 22205

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : SB21B.I965

Amount of Each Disbursement this Period

15000.00

Full Name (Last, First, Middle Initial)

B. MCKENNA & ASSOCIATES LLC

Mailing Address 2321 NORTH KENTUCKY ST.

City ARLINGTON State VA Zip Code 22205

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2011

Transaction ID : SB21B.I966

Amount of Each Disbursement this Period

32500.00

Full Name (Last, First, Middle Initial)

C. MDC & ASSOCIATES INC

Mailing Address 5013 COACHMANS CARRIAGE TERRACE

City GLEN ALLEN State VA Zip Code 23059

Purpose of Disbursement
BOOKKEEPING AND COMPLIANCE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2011

Transaction ID : SB21B.I967

Amount of Each Disbursement this Period

3313.00

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

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

50813.00

**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

Full Name (Last, First, Middle Initial)

A. MDC & ASSOCIATES INC

Mailing Address 5013 COACHMANS CARRIAGE TERRACE

City State Zip Code
GLEN ALLEN VA 23059

Purpose of Disbursement
BOOKKEEPING AND COMPLIANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB21B.I968

Amount of Each Disbursement this Period

2893.30

Full Name (Last, First, Middle Initial)

B. MELLON BANK

Mailing Address P.O. BOX 535416

City State Zip Code
PITTSBURGH PA 15253

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2011

Transaction ID : SB21B.I969

Amount of Each Disbursement this Period

4320.00

Full Name (Last, First, Middle Initial)

C. MELLON BANK

Mailing Address P.O. BOX 535416

City State Zip Code
PITTSBURGH PA 15253

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 14 / 2011

Transaction ID : SB21B.I970

Amount of Each Disbursement this Period

1080.00

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

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

8293.30

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. MELLON BANK

Mailing Address P.O. BOX 535416

City State Zip Code
PITTSBURGH PA 15253

Purpose of Disbursement
HEALTH INSURANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			01			2011			

Transaction ID : **SB21B.I971**

Amount of Each Disbursement this Period

1080.00

Full Name (Last, First, Middle Initial)

B. MERCHANT PAYMENT SERVICES

Mailing Address 7300 CHAPMAN HIGHWAY

City State Zip Code
KNOXVILLE TN 37920

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			02			2011			

Transaction ID : **SB21B.I972**

Amount of Each Disbursement this Period

110.00

Full Name (Last, First, Middle Initial)

C. MERCHANT PAYMENT SERVICES

Mailing Address 7300 CHAPMAN HIGHWAY

City State Zip Code
KNOXVILLE TN 37920

Purpose of Disbursement
CREDIT CARD PROCESSING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			02			2011			

Transaction ID : **SB21B.I973**

Amount of Each Disbursement this Period

114.00

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

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

1304.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. MISSISSIPPI DEPT OF REVENUE

Mailing Address P.O. BOX 23075

City JACKSON State MS Zip Code 39225

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : **SB21B.I974**

Amount of Each Disbursement this Period

420.00

Full Name (Last, First, Middle Initial)

B. MISSISSIPPI DEPT OF REVENUE

Mailing Address P.O. BOX 23075

City JACKSON State MS Zip Code 39225

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : **SB21B.I975**

Amount of Each Disbursement this Period

78.00

Full Name (Last, First, Middle Initial)

C. MISSISSIPPI DEPT OF REVENUE

Mailing Address P.O. BOX 23075

City JACKSON State MS Zip Code 39225

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB21B.I976**

Amount of Each Disbursement this Period

78.00

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

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

576.00

**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

Full Name (Last, First, Middle Initial)

A. MISSISSIPPI DEPT OF REVENUE

Mailing Address P.O. BOX 23075

City JACKSON State MS Zip Code 39225

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 20 / 2011

Transaction ID : **SB21B.I977**

Amount of Each Disbursement this Period

234.00

Full Name (Last, First, Middle Initial)

B. MISSISSIPPI DEPT OF REVENUE

Mailing Address P.O. BOX 23075

City JACKSON State MS Zip Code 39225

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 20 / 2011

Transaction ID : **SB21B.I978**

Amount of Each Disbursement this Period

46.00

Full Name (Last, First, Middle Initial)

C. MISSISSIPPI DEPT OF REVENUE

Mailing Address P.O. BOX 23075

City JACKSON State MS Zip Code 39225

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 30 / 2011

Transaction ID : **SB21B.I979**

Amount of Each Disbursement this Period

78.00

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

358.00

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

Full Name (Last, First, Middle Initial)

A. OFFICE OF TAX AND REVENUE

Mailing Address P.O. BOX 96385

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : **SB21B.I980**

Amount of Each Disbursement this Period

2513.00

Full Name (Last, First, Middle Initial)

B. OFFICE OF TAX AND REVENUE

Mailing Address P.O. BOX 96385

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : **SB21B.I981**

Amount of Each Disbursement this Period

1464.79

Full Name (Last, First, Middle Initial)

C. OFFICE OF TAX AND REVENUE

Mailing Address P.O. BOX 96385

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : **SB21B.I982**

Amount of Each Disbursement this Period

1417.92

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

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

5395.71

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial)

A. OFFICE OF TAX AND REVENUE

Mailing Address P.O. BOX 96385

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 20 / 2011

Transaction ID : **SB21B.I983**

Amount of Each Disbursement this Period

1351.00

Full Name (Last, First, Middle Initial)

B. OFFICE OF TAX AND REVENUE

Mailing Address P.O. BOX 96385

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : **SB21B.I984**

Amount of Each Disbursement this Period

1933.76

Full Name (Last, First, Middle Initial)

C. PIRYX INC

Mailing Address 144 2ND STREET, 1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
WEB SERVICE FEES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 30 / 2011

Transaction ID : **SB21B.I985**

Amount of Each Disbursement this Period

8943.75

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

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

12228.51

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial)

A. PIRYX INC

Mailing Address 144 2ND STREET, 1ST FLOOR

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
WEB SERVICE FEES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 31 / 2011

Transaction ID : SB21B.I986

Amount of Each Disbursement this Period

2534.68

Full Name (Last, First, Middle Initial)

B. PRINCIPAL FINANCIAL GROUP

Mailing Address P.O. BOX 10372

City State Zip Code
DES MOINES IA 50306

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 28 / 2011

Transaction ID : SB21B.I987

Amount of Each Disbursement this Period

343.15

Full Name (Last, First, Middle Initial)

C. PRINCIPAL FINANCIAL GROUP

Mailing Address P.O. BOX 10372

City State Zip Code
DES MOINES IA 50306

Purpose of Disbursement
EMPLOYEE BENEFITS

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 08 / 2011

Transaction ID : SB21B.I988

Amount of Each Disbursement this Period

439.81

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

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

3317.64

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial)

A. PUBLIC OPINION STRATEGIES

Mailing Address 214 NORTH FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2011

Transaction ID : SB21B.I989

Amount of Each Disbursement this Period

32000.00

Full Name (Last, First, Middle Initial)

B. RICHARD SALES MEDIA LLC

Mailing Address 9010 S. 10TH ST.

City PHOENIX State AZ Zip Code 85042

Purpose of Disbursement
WEB VIDEO PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2011

Transaction ID : SB21B.I990

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. RICHARD SALES MEDIA LLC

Mailing Address 9010 S. 10TH ST.

City PHOENIX State AZ Zip Code 85042

Purpose of Disbursement
WEB VIDEO PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : SB21B.I991

Amount of Each Disbursement this Period

1000.00

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

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

39000.00

**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

Full Name (Last, First, Middle Initial)

A. RICHARD SALES MEDIA LLC

Mailing Address 9010 S. 10TH ST.

City PHOENIX State AZ Zip Code 85042

Purpose of Disbursement
WEB VIDEO PRODUCTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : **SB21B.I992**

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

B. ROCK CREEK ADVISORS LLC

Mailing Address P.O. BOX 4963

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2011

Transaction ID : **SB21B.I993**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. ROCK CREEK ADVISORS LLC

Mailing Address P.O. BOX 4963

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2011

Transaction ID : **SB21B.I994**

Amount of Each Disbursement this Period

3452.99

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

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

10452.99

**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

Full Name (Last, First, Middle Initial)
A. ROCK CREEK ADVISORS LLC

Mailing Address P.O. BOX 4963

City WASHINGTON State DC Zip Code 20008

Purpose of Disbursement DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 19 / 2011

Transaction ID : **SB21B.I995**

Amount of Each Disbursement this Period: 3000.00

Full Name (Last, First, Middle Initial)
B. RSD

Mailing Address P.O. BOX 200670

City AUSTIN State TX Zip Code 78720

Purpose of Disbursement PRINTING / DESIGN

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 11 / 10 / 2011

Transaction ID : **SB21B.I996**

Amount of Each Disbursement this Period: 1520.00

Full Name (Last, First, Middle Initial)
C. SYSTEM PARKING CORP

Mailing Address 2300 M ST NW #900

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement PARKING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 12 / 20 / 2011

Transaction ID : **SB21B.I1000**

Amount of Each Disbursement this Period: 500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5020.00

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

Full Name (Last, First, Middle Initial)

A. SYSTEM PARKING CORP

Mailing Address 2300 M ST NW #900

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2011

Transaction ID : **SB21B.I997**

Amount of Each Disbursement this Period

530.00

Full Name (Last, First, Middle Initial)

B. SYSTEM PARKING CORP

Mailing Address 2300 M ST NW #900

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement
PARKING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2011

Transaction ID : **SB21B.I998**

Amount of Each Disbursement this Period

530.00

Full Name (Last, First, Middle Initial)

C. SYSTEM PARKING CORP

Mailing Address 2300 M ST NW #900

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement
VOID CHECK

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2011

Transaction ID : **SB21B.I999**

Amount of Each Disbursement this Period

-500.00

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

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

560.00

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address P.O. BOX 2187

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
WEBSITE HOSTING / DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2011

Transaction ID : SB21B.I1001

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address P.O. BOX 2187

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
WEBSITE HOSTING / DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2011

Transaction ID : SB21B.I1002

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address P.O. BOX 2187

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
WEBSITE HOSTING / DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2011

Transaction ID : SB21B.I1003

Amount of Each Disbursement this Period

6044.18

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

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

13044.18

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

Use separate schedule(s)
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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

Full Name (Last, First, Middle Initial)

A. TARGETED VICTORY

Mailing Address P.O. BOX 2187

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
WEBSITE HOSTING / DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			08			2011			

Transaction ID : SB21B.I1004

Amount of Each Disbursement this Period

33000.00

Full Name (Last, First, Middle Initial)

B. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 33045

City WASHINGTON State DC Zip Code 20033

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			07			2011			

Transaction ID : SB21B.I1005

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 33045

City WASHINGTON State DC Zip Code 20033

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			20			2011			

Transaction ID : SB21B.I1006

Amount of Each Disbursement this Period

4176.48

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

44676.48

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 33045

City WASHINGTON State DC Zip Code 20033

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : **SB21B.I1007**

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

B. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 33045

City WASHINGTON State DC Zip Code 20033

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : **SB21B.I1008**

Amount of Each Disbursement this Period

8024.47

Full Name (Last, First, Middle Initial)

C. THE MK GROUP LLC

Mailing Address 5905 GLOSTER ROAD

City BETHESDA State MD Zip Code 20816

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : **SB21B.I1009**

Amount of Each Disbursement this Period

5444.55

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

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

20969.02

**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

Full Name (Last, First, Middle Initial)

A. THE MK GROUP LLC

Mailing Address 5905 GLOSTER ROAD

City State Zip Code
BETHESDA MD 20816

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 10 / 2011

Transaction ID : SB21B.I1010

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. THE MK GROUP LLC

Mailing Address 5905 GLOSTER ROAD

City State Zip Code
BETHESDA MD 20816

Purpose of Disbursement
DONOR DEVELOPMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB21B.I1011

Amount of Each Disbursement this Period

5203.00

Full Name (Last, First, Middle Initial)

C. THE TARRANCE GROUP INC

Mailing Address 201 N. UNION STREET, STE 410

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Disbursement
SURVEY / POLLING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 28 / 2011

Transaction ID : SB21B.I747

Amount of Each Disbursement this Period

33228.50

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

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

43431.50

**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

Full Name (Last, First, Middle Initial)

A. TOTAL WIRING SYSTEMS INC

Mailing Address P.O. BOX 487

City CLINTON State MD Zip Code 20735

Purpose of Disbursement
COMPUTER / PHONE SERVICES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2011

Transaction ID : SB21B.I748

Amount of Each Disbursement this Period

950.00

Full Name (Last, First, Middle Initial)

B. TRULAND SERVICE

Mailing Address 5701-J GENERAL WASHINGTON DRIVE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
OFFICE ELECTRICAL SERVICES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 13 / 2011

Transaction ID : SB21B.I749

Amount of Each Disbursement this Period

720.00

Full Name (Last, First, Middle Initial)

C. UPGRADE FILMS

Mailing Address 3299 K STREET NW, STE 200

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
TV / MEDIA PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2011

Transaction ID : SB21B.I750

Amount of Each Disbursement this Period

13852.00

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

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

15522.00

**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

Full Name (Last, First, Middle Initial)

A. UPGRADE FILMS

Mailing Address 3299 K STREET NW, STE 200

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement
TV / MEDIA PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : SB21B.I751

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. US DEPARTMENT OF TREASURY

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2011

Transaction ID : SB21B.I752

Amount of Each Disbursement this Period

638.86

Full Name (Last, First, Middle Initial)

C. US DEPARTMENT OF TREASURY

Mailing Address 1501 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I753

Amount of Each Disbursement this Period

8391.64

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

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

10530.50

**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

Full Name (Last, First, Middle Initial)

A. US DEPARTMENT OF TREASURY

Mailing Address 1502 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 15 / 2011

Transaction ID : SB21B.I754

Amount of Each Disbursement this Period

8142.84

Full Name (Last, First, Middle Initial)

B. US DEPARTMENT OF TREASURY

Mailing Address 1503 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SB21B.I755

Amount of Each Disbursement this Period

17959.19

Full Name (Last, First, Middle Initial)

C. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 06 / 2011

Transaction ID : SB21B.I757

Amount of Each Disbursement this Period

728.23

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

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

26830.26

**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

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 08 / 2011

Transaction ID : SB21B.I758

Amount of Each Disbursement this Period

506.00

Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 10 / 2011

Transaction ID : SB21B.I759

Amount of Each Disbursement this Period

10.20

Full Name (Last, First, Middle Initial)

C. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 15 / 2011

Transaction ID : SB21B.I760

Amount of Each Disbursement this Period

313.00

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

829.20

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

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 30 / 2011

Transaction ID : SB21B.I761

Amount of Each Disbursement this Period

252.66

Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
VOID CHECK

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 05 / 2011

Transaction ID : SB21B.I762

Amount of Each Disbursement this Period

-728.23

Full Name (Last, First, Middle Initial)

C. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 15 / 2011

Transaction ID : SB21B.I763

Amount of Each Disbursement this Period

252.66

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

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

-222.91

**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

Full Name (Last, First, Middle Initial)

A. VIRGINIA DEPT OF TAXATION

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement
PAYROLL TAXES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 30 / 2011

Transaction ID : SB21B.I764

Amount of Each Disbursement this Period

1662.09

Full Name (Last, First, Middle Initial)

B. VISA

Mailing Address P.O. BOX 4513

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2011

Transaction ID : SB21B.I765

Amount of Each Disbursement this Period

1491.07

Full Name (Last, First, Middle Initial)

C. AT&T

Mailing Address P.O. BOX 6416

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2011

Transaction ID : SB21B.I1014

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

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

3153.16

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

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2011

Transaction ID : SB21B.I1015

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CUSTOM SCOOP

Mailing Address P.O. BOX 609

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2011

Transaction ID : SB21B.I1016

Amount of Each Disbursement this Period

407.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. FEDEX

Mailing Address 942 S SHADY GROVE ROAD

City State Zip Code
MEMPHIS TN 38120

Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2011

Transaction ID : SB21B.I1018

Amount of Each Disbursement this Period

290.81

[MEMO ITEM]

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

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

0.00

**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

Full Name (Last, First, Middle Initial)

A. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
INTERNET EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2011			

Transaction ID : SB21B.I1019

Amount of Each Disbursement this Period

72.02

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
INTERNET EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2011			

Transaction ID : SB21B.I1020

Amount of Each Disbursement this Period

120.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VISA

Mailing Address P.O. BOX 4513

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2011			

Transaction ID : SB21B.I766

Amount of Each Disbursement this Period

162.45

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

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

162.45

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address P.O. BOX 6416

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			21			2011			

Transaction ID : SB21B.I1024

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. VISA

Mailing Address P.O. BOX 4513

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2011			

Transaction ID : SB21B.I767

Amount of Each Disbursement this Period

2972.42

Full Name (Last, First, Middle Initial)

C. AMAZON.COM

Mailing Address 410 TERRY AVENUE N

City State Zip Code
SEATTLE WA 98109

Purpose of Disbursement
OFFICE SUPPLIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			22			2011			

Transaction ID : SB21B.I1025

Amount of Each Disbursement this Period

113.56

[MEMO ITEM]

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

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

2972.42

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address P.O. BOX 6416

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I1026

Amount of Each Disbursement this Period

2	5	.	0	0
---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I1027

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CUSTOM SCOOP

Mailing Address P.O. BOX 609

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Transaction ID : SB21B.I1028

Amount of Each Disbursement this Period

4	0	7	.	0	0
---	---	---	---	---	---

[MEMO ITEM]

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

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

0	0	.	0	0
---	---	---	---	---

0	0	.	0	0
---	---	---	---	---

**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

Full Name (Last, First, Middle Initial)

A. DELTA AIRLINES

Mailing Address P.O. BOX 20706

City ATLANTA State GA Zip Code 30320

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2011

Transaction ID : SB21B.I1012

Amount of Each Disbursement this Period

675.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address 942 S SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2011

Transaction ID : SB21B.I1013

Amount of Each Disbursement this Period

521.76

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. MARRIOTT

Mailing Address 10400 FERNWOOD ROAD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 22 / 2011

Transaction ID : SB21B.I1029

Amount of Each Disbursement this Period

121.14

[MEMO ITEM]

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

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

0.00

**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

Full Name (Last, First, Middle Initial)

A. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2011

Transaction ID : SB21B.I1031

Amount of Each Disbursement this Period

12.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2011

Transaction ID : SB21B.I1032

Amount of Each Disbursement this Period

12.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2011

Transaction ID : SB21B.I1033

Amount of Each Disbursement this Period

243.70

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2011

Transaction ID : SB21B.I1034

Amount of Each Disbursement this Period

303.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. WASHINGTON COURIER

Mailing Address 5520 CHEROKEE AVENUE

City ALEXANDRIA State VA Zip Code 22312

Purpose of Disbursement
COURIER EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2011

Transaction ID : SB21B.I1035

Amount of Each Disbursement this Period

4.86

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VISA

Mailing Address P.O. BOX 4513

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		22		2011

Transaction ID : SB21B.I768

Amount of Each Disbursement this Period

110.00

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

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

110.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address P.O. BOX 6416

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			19			2011			

Transaction ID : SB21B.I1040

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CEO UPDATE

Mailing Address 1990 M STREET NW, 8TH FLOOR
8TH FLOOR

City State Zip Code
WASHINGTON DC 20036

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			19			2011			

Transaction ID : SB21B.I1042

Amount of Each Disbursement this Period

249.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
DATABASE MANAGEMENT

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			19			2011			

Transaction ID : SB21B.I1045

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

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

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

0.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. CUSTOM SCOOP

Mailing Address P.O. BOX 609

City State Zip Code
CONCORD NH 03302

Purpose of Disbursement
SUBSCRIPTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I1047

Amount of Each Disbursement this Period

407.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. DELTA AIRLINES

Mailing Address P.O. BOX 20706

City State Zip Code
ATLANTA GA 30320

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I1048

Amount of Each Disbursement this Period

307.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. DELTA AIRLINES

Mailing Address P.O. BOX 20706

City State Zip Code
ATLANTA GA 30320

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I1049

Amount of Each Disbursement this Period

48.85

[MEMO ITEM]

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

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

0.00

**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

Full Name (Last, First, Middle Initial)

A. FEDEX

Mailing Address 942 S SHADY GROVE ROAD

City MEMPHIS State TN Zip Code 38120

Purpose of Disbursement
SHIPPING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1053

Amount of Each Disbursement this Period

111.54

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. GODADDY.COM

Mailing Address 14455 N HAYDEN ROAD

City SCOTTSDALE State AZ Zip Code 85260

Purpose of Disbursement
INTERNET EXPENSE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1054

Amount of Each Disbursement this Period

24.34

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. HERTZ

Mailing Address 225 BRAE BLVD.

City PARK RIDGE State NJ Zip Code 07656

Purpose of Disbursement
CAR RENTAL

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1055

Amount of Each Disbursement this Period

45.26

[MEMO ITEM]

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

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

0.00

**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

Full Name (Last, First, Middle Initial)

A. HILTON HOTEL

Mailing Address 7930 JONES BRANCH DRIVE #1100

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I1057

Amount of Each Disbursement this Period

375.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. MARRIOTT

Mailing Address 10400 FERNWOOD ROAD

City BETHESDA State MD Zip Code 20817

Purpose of Disbursement
LODGING

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I1059

Amount of Each Disbursement this Period

122.04

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SEAMLESS WEB

Mailing Address 232 MADISON AVENUE, #1409

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement
MEETING EXPENSE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 19 / 2011

Transaction ID : SB21B.I1063

Amount of Each Disbursement this Period

164.52

[MEMO ITEM]

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

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

0.00

**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

Full Name (Last, First, Middle Initial)

A. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 12 / 19 / 2011

Transaction ID : **SB21B.I1065**

Amount of Each Disbursement this Period: 7.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 12 / 19 / 2011

Transaction ID : **SB21B.I1066**

Amount of Each Disbursement this Period: 7.50

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District: 00

Date of Disbursement: 12 / 19 / 2011

Transaction ID : **SB21B.I1067**

Amount of Each Disbursement this Period: 665.95

[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)

<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

Full Name (Last, First, Middle Initial)

A. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1068

Amount of Each Disbursement this Period

149.95

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1069

Amount of Each Disbursement this Period

200.90

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1070

Amount of Each Disbursement this Period

303.70

[MEMO ITEM]

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

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

0.00

**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

Full Name (Last, First, Middle Initial)

A. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1071

Amount of Each Disbursement this Period

303.70

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USAIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City PHOENIX State AZ Zip Code 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1072

Amount of Each Disbursement this Period

61.35

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. VISA

Mailing Address P.O. BOX 4513

City CAROL STREAM State IL Zip Code 60197

Purpose of Disbursement
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I770

Amount of Each Disbursement this Period

100.00

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

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

100.00

**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

Full Name (Last, First, Middle Initial)

A. AT&T

Mailing Address P.O. BOX 6416

City State Zip Code
CAROL STREAM IL 60197

Purpose of Disbursement
DATA PLAN

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I1074

Amount of Each Disbursement this Period

100.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. VOTER CONSUMER RESEARCH INC

Mailing Address 501 C STREET, NE

City State Zip Code
WASHINGTON DC 20002

Purpose of Disbursement
SURVEY / POLLING

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 08 / 2011

Transaction ID : SB21B.I771

Amount of Each Disbursement this Period

31754.61

Full Name (Last, First, Middle Initial)

C. VSTHEBRAIN LLC

Mailing Address 1646 10 STREET S

City State Zip Code
ARLINGTON VA 22204

Purpose of Disbursement
VIDEO PRODUCTION

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2011

Transaction ID : SB21B.I772

Amount of Each Disbursement this Period

13945.00

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

45699.61

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

Full Name (Last, First, Middle Initial)

A. VSTHEBRAIN LLC

Mailing Address 1646 10 STREET S

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
VIDEO PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 07 / 2011

Transaction ID : SB21B.I773

Amount of Each Disbursement this Period

6972.50

Full Name (Last, First, Middle Initial)

B. VSTHEBRAIN LLC

Mailing Address 1646 10 STREET S

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement
VIDEO PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 16 / 2011

Transaction ID : SB21B.I774

Amount of Each Disbursement this Period

11772.50

Full Name (Last, First, Middle Initial)

C. WILSON-GRAND COMMUNICATIONS

Mailing Address 429 N. ST. ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TV / MEDIA PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
11 / 03 / 2011

Transaction ID : SB21B.I775

Amount of Each Disbursement this Period

437.60

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

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

19182.60

**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

Full Name (Last, First, Middle Initial)

A. WILSON-GRAND COMMUNICATIONS

Mailing Address 429 N. ST. ASAPH ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TV / MEDIA PRODUCTION

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 19 / 2011

Transaction ID : SB21B.I776

Amount of Each Disbursement this Period

2607.50

Full Name (Last, First, Middle Initial)

B. XIGENT INC.

Mailing Address P.O. BOX 320129

City ALEXANDRIA State VA Zip Code 22320

Purpose of Disbursement
WEBSITE DEVELOPMENT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 10 / 2011

Transaction ID : SB21B.I777

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

12607.50

1059008.84