

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

American Crossroads

ADDRESS (number and street) 1401 New York Avenue NW

Check if different than previously reported. (ACC)

Suite 1200

Washington

DC

20005

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00487363

3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

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

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

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

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

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

5. Covering Period

[MM] / [DD] / [YYYY] 05 / 01 / 2012 through [MM] / [DD] / [YYYY] 05 / 31 / 2012

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

Type or Print Name of Treasurer Caleb Crosby

Signature of Treasurer

Caleb Crosby

[Electronically Filed]

Date

[MM] / [DD] / [YYYY] 06 / 20 / 2012

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

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

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

American Crossroads

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="15592293.37"/>	<input type="text" value="15592293.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="25519964.70"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="4553525.00"/>	<input type="text" value="16112937.61"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="30073489.70"/>	<input type="text" value="31705230.98"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="624445.02"/>	<input type="text" value="2256186.30"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="29449044.68"/>	<input type="text" value="29449044.68"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

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).....	4540700.00	16065351.60
(ii) Unitemized	12825.00	35623.93
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	4553525.00	16100975.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	4553525.00	16100975.53
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	11962.08
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))..... ▶	4553525.00	16112937.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	4553525.00	16112937.61

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	293025.02	1916766.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	293025.02	1916766.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	150000.00	150000.00
24. Independent Expenditures (use Schedule E)	181420.00	189420.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	624445.02	2256186.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	624445.02	2256186.30

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)	4553525.00	16100975.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4553525.00	16100975.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	293025.02	1916766.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	11962.08
38. Net Operating Expenditures (subtract Line 37 from Line 36)	293025.02	1904804.22

: 97 `A-G79 @C B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN
Transaction ID :

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

Form/Schedule:
Transaction ID:

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

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

FOR LINE NUMBER: PAGE 7 OF 89
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)
A. DONALD EICHSTAEDT

Mailing Address 18222 REDWOOD AVE

City State Zip Code
LATHRUP VILLAGE MI 48076-7005

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 ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 01 / 2012
Transaction ID : SA11.5711

Amount of Each Receipt this Period
300.00

CONTRIBUTION

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

Mailing Address 921 RIPLEY LANE

City State Zip Code
OYSTER BAY NY 11771-4605

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

Name of Employer Occupation
ESTABROOK CAPITAL MANAGEMENT INVESTMENT MANAGEMNT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 02 / 2012
Transaction ID : SA11.5717

Amount of Each Receipt this Period
200.00

CONTRIBUTION

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

Mailing Address 2 BREEZE KNOLL

City State Zip Code
WESTFIELD NJ 07090-2910

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

Name of Employer Occupation
JNJ LAWYER

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
 05 / 02 / 2012
Transaction ID : SA11.5716

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 750.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 89
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 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. JAMES DOELL

Mailing Address **7233 NORTH JANMAR**

City **DALLAS** State **TX** Zip Code **75230-3116**

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
05 / 02 / 2012
Transaction ID : SA11.5725

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address **636 LAKE VARUNA DRIVE**

City **GAITHERSBURG** State **MD** Zip Code **20878-2175**

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

Name of Employer **DONOHOE ADVISORY ASSOCIATES LLC** Occupation **CONSULTANT**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt
05 / 02 / 2012
Transaction ID : SA11.5722

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. HENRY D JACOBS JR

Mailing Address **320 DALE DRIVE**

City **SPARTANBURG** State **SC** Zip Code **29307-4004**

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
05 / 02 / 2012
Transaction ID : SA11.5719

Amount of Each Receipt this Period
250.00

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: PAGE 9 OF 89
(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. GEORGE ABD

Mailing Address 1025 SAVONNE COURT

City State Zip Code
CHESTERFIELD MO 63005-4977

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

Name of Employer Occupation
PRETIUM PACKAGING CEO

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
 05 / 03 / 2012
Transaction ID : SA11.5767

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 1101 CEDARVIEW LANE

City State Zip Code
FRANKLIN TN 37067-4074

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

Name of Employer Occupation
R.D. ABBOTT CO. SALES REP

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
 05 / 03 / 2012
Transaction ID : SA11.5779

Amount of Each Receipt this Period
50.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. AL ROSENBLUM

Mailing Address 55 MAKAHIKI ST

City State Zip Code
PAIA HI 96779-8601

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 03 / 2012
Transaction ID : SA11.5765

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1300.00

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

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

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FOR LINE NUMBER: PAGE 10 OF 89
(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. HUGH WARD

Mailing Address **27 MONTCLAIR ROAD**

City State Zip Code
OAK RIDGE TN 37830-8331

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

Name of Employer Occupation
BERNSTEIN, STAIR, MCADAMS, LLP ATTORNEY

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 03 / 2012

Transaction ID : SA11.5734

Amount of Each Receipt this Period
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DAVID A. BURTON M.D.

Mailing Address **1040 OAK HILLS WAY**

City State Zip Code
SALT LAKE CITY UT 84108-2024

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2012

Transaction ID : SA11.5752

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

Mailing Address **16 BLUFF POINT**

City State Zip Code
WESTPORT CT 06880-6902

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

Name of Employer Occupation
BLUFF POINT ASSOCIATES INVESTOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
05 / 04 / 2012

Transaction ID : SA11.5750

Amount of Each Receipt this Period
100000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **101100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 89
	<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. WHI, INC.
Full Name (Last, First, Middle Initial)

Mailing Address 5986 FINANCIAL DRIVE

City NORCROSS State GA Zip Code 30071-2949

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

Name of Employer N/A Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 04 / 2012
Transaction ID : SA11.5754

Amount of Each Receipt this Period
 100000.00

CONTRIBUTION

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

Mailing Address 2600 COMPASS RD

City GLENVIEW State IL Zip Code 60026-8001

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

Name of Employer CREEDEN & ASSOCIATES Occupation PRESIDENT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2012
Transaction ID : SA11.5784

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

Mailing Address 560 DIAMOND POINT

City OAK POINT State TX Zip Code 75068-2256

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

Name of Employer CLG, LLC Occupation BANKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 05 / 2012
Transaction ID : SA11.5782

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 101500.00

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 89
	<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. RICHARD BAXTER GILLIAM
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 820
 City KESWICK State VA Zip Code 22947-0820
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CUMBERLAND RESOURCES Occupation FOUNDER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 05 / 07 / 2012
Transaction ID : SA11.5757
 Amount of Each Receipt this Period 250000.00
 CONTRIBUTION

B. GLEN SHIPLEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 3520 MILLER FARMS LN
 City DULUTH State GA Zip Code 30096-2973
 FEC ID number of contributing federal political committee. **C**
 Name of Employer EASYLINK SERVICES INTERNATIONAL Occupation EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 07 / 2012
Transaction ID : SA11.5794
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

C. BARRY TWOMEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 4311 MICHAELS CV
 City AUSTIN State TX Zip Code 78746-1621
 FEC ID number of contributing federal political committee. **C**
 Name of Employer TGF MANAGEMENT Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 05 / 07 / 2012
Transaction ID : SA11.5797
 Amount of Each Receipt this Period 2500.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 252750.00
TOTAL This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 13 OF 89
(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. ERIC FOX

Mailing Address 140 MEADOW LAKE DR.

City Hendersonville State TN Zip Code 37075-5510

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

Name of Employer SELF/LAW OFFICE OF ERIC K. FOX Occupation 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
 05 / 08 / 2012
Transaction ID : SA11.5804

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 9601 CALLAWAY COURT

City Denton State TX Zip Code 76207-5603

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
 05 / 08 / 2012
Transaction ID : SA11.5800

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 17674 SAN MARINO CIRCLE

City Fountain Valley State CA Zip Code 92708-5248

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

Name of Employer PACIFIC TELEPHONE Occupation TELEPHONE OPERATOR

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
 05 / 08 / 2012
Transaction ID : SA11.5763

Amount of Each Receipt this Period
250.00

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: PAGE 14 OF 89
(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. THOMAS COOPER

Mailing Address 201 FAIR LN

City State Zip Code
TYLER TX 75701-5454

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

Name of Employer Occupation
TRINITY MOTHER FRANCES PHYSICIAN

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
 05 / 09 / 2012
Transaction ID : SA11.5817

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 2332 EVERGREEN ST

City State Zip Code
PAMPA TX 79065-2901

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

Name of Employer Occupation
SELF-EMPLOYED INSURANCE

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
 05 / 09 / 2012
Transaction ID : SA11.5812

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

Mailing Address 5953 QUEENSTON ST.

City State Zip Code
SPRINGFIELD VA 22152-1743

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

Name of Employer Occupation
SELF-EMPLOYED SOFTWARE ENGINEER

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
 05 / 09 / 2012
Transaction ID : SA11.5813

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1100.00

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 15 OF 89
	<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. EUGENE MURPHY
Full Name (Last, First, Middle Initial)

Mailing Address 46 CENTRAL DR

City PLANDOME State NY Zip Code 11030-1450

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2012

Transaction ID : SA11.5811

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

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

Mailing Address P.O. BOX-57310

City LINCOLN State NE Zip Code 68505-7310

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

Name of Employer COMCOR HOLDING INC Occupation EXECUTIVE

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
 05 / 09 / 2012

Transaction ID : SA11.5814

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 422 E. DAYTON-YELLOW SPRINGS RD.

City FAIRBORN State OH Zip Code 45324-3910

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

Name of Employer BELTON-STROUP FUNERAL HOME Occupation OWNER / FUNERAL DIRECTOR

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
 05 / 09 / 2012

Transaction ID : SA11.5810

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 89
	<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. THOMAS E. BEACH

Mailing Address 300 BARR HARBOUR DR.
SUITE 220

City WEST CONSHOHOCKEN State PA Zip Code 19428-3902

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

Name of Employer BEACH INVESTMENT COUNSEL, INC. Occupation INVESTMENT ADVISOR

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
05 / 10 / 2012
Transaction ID : SA11.5761

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MIKE BLACK

Mailing Address 5622 DYER STREET,SUITE 200

City DALLAS State TX Zip Code 75206-5004

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 ▼
1250.00

Date of Receipt
05 / 10 / 2012
Transaction ID : SA11.5819

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 1 FRANKLIN PARKWAY

City SAN MATEO State CA Zip Code 94403-1906

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

Name of Employer FRANKLIN RESOURCES, INC. Occupation CHAIRMAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200000.00

Date of Receipt
05 / 10 / 2012
Transaction ID : SA11.5760

Amount of Each Receipt this Period
200000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	210250.00
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 89
	<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 WITTER
Full Name (Last, First, Middle Initial)

Mailing Address 234 S. 68 STREET

City BOULDER State CO Zip Code 80303-4305

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

Name of Employer RENTSCHLER & WITTER, LLC Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
17500.00

Date of Receipt
05 / 10 / 2012
Transaction ID : SA11.5818

Amount of Each Receipt this Period
7500.00

CONTRIBUTION

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

Mailing Address 758 ROSARITA DR.

City VENTURA State CA Zip Code 93003-3943

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

Name of Employer COMMUNITY MEMORIAL HOSPITAL Occupation ACCOUNTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 11 / 2012
Transaction ID : SA11.5856

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 2707 E. WILLAMETTE LANE

City GREENWOOD VILLAGE State CO Zip Code 80121-1612

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
05 / 12 / 2012
Transaction ID : SA11.5861

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 12750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 89
	<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. CHARLES SANFORD
Full Name (Last, First, Middle Initial)

Mailing Address 2707 WILLAMETTE DR

City GREENWOOD VILLAGE State CO Zip Code 80121-1612

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 ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2012

Transaction ID : SA11.5860

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

Mailing Address 32 S. WASHINGTON CIR

City HINSDALE State IL Zip Code 60521-4532

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

Name of Employer SIG Occupation CONSULTANT

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 12 / 2012

Transaction ID : SA11.5862

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

C. LISA PRICE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 682885

City FRANKLIN State TN Zip Code 37068-2885

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

Name of Employer GE Occupation BUSINESS DEVELOPMENT EXECUTIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2012

Transaction ID : SA11.5864

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 10000.00

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 89
	<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. DANIEL SMITH
Full Name (Last, First, Middle Initial)

Mailing Address 31053 430TH

City TABOR State SD Zip Code 57063-6202

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
 05 / 13 / 2012

Transaction ID : SA11.5868

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address 2700 CRESCENT SPRINGS ROAD

City FT. MITCHELL State KY Zip Code 41017-1523

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

Name of Employer SIGNATURE HARDWARE Occupation RETAIL SALES

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
 05 / 14 / 2012

Transaction ID : SA11.5871

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

C. WILLIAM J. SCHMUHL Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 1421 HONAN DRIVE

City SOUTH BEND State IN Zip Code 46614-2164

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

Name of Employer U OF NOTRE DAME Occupation ACADEMIC

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
 05 / 14 / 2012

Transaction ID : SA11.5870

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 20 OF 89
(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. W. ED BOSARGE

Mailing Address 4203 YOAKUM BLVD

City HOUSTON State TX Zip Code 77006-5455

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

Name of Employer QUANTLAB FINANCIAL Occupation MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2012
Transaction ID : SA11.5878

Amount of Each Receipt this Period
100000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DALE K. CLINE

Mailing Address PO BOX 3966

City HICKORY State NC Zip Code 28603-3966

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

Name of Employer DALE K. CLINE, CPA, PLLC Occupation OWNER

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
 05 / 15 / 2012
Transaction ID : SA11.5839

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DOUGLAS P. FIELDS

Mailing Address 100 MIDWOOD RD.

City GREENWICH State CT Zip Code 06830-3837

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 ▼
350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 15 / 2012
Transaction ID : SA11.5836

Amount of Each Receipt this Period
150.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 105150.00

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 89
	<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. ROGER HERTOOG		Date of Receipt MM / DD / YYYY 05 / 15 / 2012
Mailing Address 1040 5TH AVENUE APT 13-A		Transaction ID : SA11.5835
City NEW YORK	State NY	Zip Code 10028-0137
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250000.00	
Name of Employer HERTOG FOUNDATION, INC.	Occupation CHAIRMAN	CONTRIBUTION
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) B. DONALD S. TINGLEY		Date of Receipt MM / DD / YYYY 05 / 15 / 2012
Mailing Address 78890 SUNRISE MOUNTAIN VW		Transaction ID : SA11.5838
City PALM DESERT	State CA	Zip Code 92211-2614
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00	
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
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. SANDRA R. WUNDERLICH		Date of Receipt MM / DD / YYYY 05 / 15 / 2012
Mailing Address 2430 WENDOVER DRIVE		Transaction ID : SA11.5837
City NAPERVILLE	State IL	Zip Code 60565-3255
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00	
Name of Employer SELF-EMPLOYED	Occupation ATTORNEY	CONTRIBUTION
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).....▶	251500.00
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 89
	<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. RUTHERFORD RIVER GROUP
Full Name (Last, First, Middle Initial)
Mailing Address 2352 PINE STREET

City SAN FRANCISCO	State CA	Zip Code 94115-2715
-----------------------	-------------	------------------------

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

Name of Employer N/A	Occupation N/A
-------------------------	-------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	15	/	2012

Transaction ID : SA11.5842

Amount of Each Receipt this Period
250000.00

CONTRIBUTION

B. JOEL JOHNSON
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 11428

City KNOXVILLE	State TN	Zip Code 37939-1428
-------------------	-------------	------------------------

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

Name of Employer JPM	Occupation OPERATIONS DIRECTOR
-------------------------	-----------------------------------

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
05	/	16	/	2012

Transaction ID : SA11.5892

Amount of Each Receipt this Period
250.00

CONTRIBUTION

C. STEVE MCKIBBON
Full Name (Last, First, Middle Initial)
Mailing Address 755 GRAND BLVD

City MIRAMAR BEACH	State FL	Zip Code 32550-1838
-----------------------	-------------	------------------------

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
05	/	16	/	2012

Transaction ID : SA11.5908

Amount of Each Receipt this Period
500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	250750.00
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 89
	<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. ROCCO PAPALIA
Full Name (Last, First, Middle Initial)
Mailing Address 1717 ARTS PLAZA
STE 2209
City DALLAS State TX Zip Code 75201-2529
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation CONSULTANT
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 16 / 2012
Transaction ID : SA11.5882
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

B. TIMOTHY SHIELDS
Full Name (Last, First, Middle Initial)
Mailing Address 18404 OVD
City EDMONDS State WA Zip Code 98020
FEC ID number of contributing federal political committee. **C**
Name of Employer SELF-EMPLOYED Occupation ORTHODONTIST
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 1000.00

Date of Receipt 05 / 16 / 2012
Transaction ID : SA11.5888
Amount of Each Receipt this Period 1000.00
CONTRIBUTION

C. ROBERT THOMAS
Full Name (Last, First, Middle Initial)
Mailing Address 128 VISTA OAK DR
City LONGWOOD State FL Zip Code 32779-3008
FEC ID number of contributing federal political committee. **C**
Name of Employer HOUSE OF BEN AVRAHAM Occupation RABBI
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 2000.00

Date of Receipt 05 / 16 / 2012
Transaction ID : SA11.5883
Amount of Each Receipt this Period 1000.00
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 24 OF 89
	<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. J. CHARLIE BLUE
Full Name (Last, First, Middle Initial)

Mailing Address 3833 Hwy 6

City CLIFTON State TX Zip Code 76634-5148

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

Name of Employer SELF-EMPLOYED Occupation RANCHER/INVESTOR

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
 05 / 17 / 2012

Transaction ID : SA11.5906

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 965 WINSLOW WAY E #301

City BAINBRIDGE IS State WA Zip Code 98110-2439

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

Name of Employer FIRST WASHINGTON Occupation STOCKBROKER

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
 05 / 17 / 2012

Transaction ID : SA11.5902

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. FREDERICK D. GORIN
Full Name (Last, First, Middle Initial)

Mailing Address 21 MT. MCKINLEY COURT

City CLAYTON State CA Zip Code 94517-1507

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
 05 / 17 / 2012

Transaction ID : SA11.5907

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 600.00

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 25 OF 89
	<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. AL G. HILL JR.		Date of Receipt MM / DD / YYYY 05 / 17 / 2012 Transaction ID : SA11.5844
Mailing Address 47 HIGHLAND PARK VILLAGE SUITE 200		Amount of Each Receipt this Period 100000.00
City DALLAS	State TX	Zip Code 75205-2786
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer A.G. HILL PARTNERS	Occupation PARTNER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400000.00	

Full Name (Last, First, Middle Initial) B. BRENT MCKAY		Date of Receipt MM / DD / YYYY 05 / 17 / 2012 Transaction ID : SA11.5912
Mailing Address 2203 PHELPS AVENUE		Amount of Each Receipt this Period 50.00
City FREMONT	State NE	Zip Code 68025-4525
FEC ID number of contributing federal political committee. C	CONTRIBUTION	
Name of Employer STAPLES	Occupation GENERAL MANAGER	
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. CHARLES SEARS		Date of Receipt MM / DD / YYYY 05 / 17 / 2012 Transaction ID : SA11.5905
Mailing Address 3609 VIA LA SELVA		Amount of Each Receipt this Period 500.00
City PALOS VERDES ESTATES	State CA	Zip Code 90274-1115
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 ▼ 600.00	

SUBTOTAL of Receipts This Page (optional).....▶	100550.00
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 89
	<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. STEPHEN SHERRILL		Date of Receipt MM / DD / YYYY 05 / 17 / 2012 Transaction ID : SA11.5845
Mailing Address 765 PARK AVENUE APT 4B		Amount of Each Receipt this Period 100000.00
City NEW YORK	State NY	Zip Code 10021-4271
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer BRUCKMANN ROSSER SHERRILL & CO	Occupation PRIVATE EQUITY INVESTOR	
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. RICK SMITH		Date of Receipt MM / DD / YYYY 05 / 17 / 2012 Transaction ID : SA11.5910
Mailing Address 24276 SE 147TH PLACE		Amount of Each Receipt this Period 500.00
City ISSAQUAH	State WA	Zip Code 98027-6989
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer CORPORATE MOVING SYSTEMS	Occupation CEO	
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. EDWARD WILL		Date of Receipt MM / DD / YYYY 05 / 17 / 2012 Transaction ID : SA11.5900
Mailing Address 3883 GALLO DRIVE		Amount of Each Receipt this Period 250.00
City SAINT CHARLES	State MO	Zip Code 63304-1410
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	

SUBTOTAL of Receipts This Page (optional).....▶	100750.00
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 89
	<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. JOHN DOWD
Full Name (Last, First, Middle Initial)

Mailing Address 1529 CROWELL ROAD

City VIENNA State VA Zip Code 22182-1514

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

Name of Employer AKIN,GUMP,STRAUSS, HAER & FELD, LLP Occupation ATTORNEY

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 05 / 18 / 2012
Transaction ID : SA11.6009

Amount of Each Receipt this Period 10000.00

CONTRIBUTION

B. CYNTHIA EICHENHOLZ
Full Name (Last, First, Middle Initial)

Mailing Address 3933 CENTENARY DRIVE

City DALLAS State TX Zip Code 75225-5428

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

Name of Employer HOMEMAKER Occupation HOMEMAKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2012
Transaction ID : SA11.6010

Amount of Each Receipt this Period 250.00

CONTRIBUTION

C. FREDA MCCULLOUGH
Full Name (Last, First, Middle Initial)

Mailing Address 107 CLOCKTOWER DRIVE UNIT 3109

City WALTHAM State MA Zip Code 02452-7869

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

Name of Employer G 2 TRADING Occupation STOCK TRADER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 18 / 2012
Transaction ID : SA11.6008

Amount of Each Receipt this Period 250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶ 10500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 89
	<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. CHRISTINE RALPHS
Full Name (Last, First, Middle Initial)

Mailing Address 26314 RAVENHILL ROAD

City State Zip Code
SANTA CLARITA CA 91387-4047

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

Name of Employer Occupation
E&E SALES ACCOUNT MANAGER

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
05 / 19 / 2012

Transaction ID : SA11.5987

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. DONALD POMPLIANO
Full Name (Last, First, Middle Initial)

Mailing Address 14320 E KALIL DR

City State Zip Code
SCOTTSDALE AZ 85259-4620

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
05 / 20 / 2012

Transaction ID : SA11.5997

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

Mailing Address P.O. BOX 7906

City State Zip Code
ASPEN CO 81612-7906

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 ▼
500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 20 / 2012

Transaction ID : SA11.5992

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 89
	<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 WEBBE
Full Name (Last, First, Middle Initial)

Mailing Address 292 GOULDING CREEK DRIVE

City DURANGO State CO Zip Code 81301-8872

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
 05 / 20 / 2012

Transaction ID : SA11.5991

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

Mailing Address 8606 CYPRESS LAKES DRIVE

City RALEIGH State NC Zip Code 27615-2116

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2012

Transaction ID : SA11.5998

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. JOE NEUHOFF III
Full Name (Last, First, Middle Initial)

Mailing Address 15 VOM EIGEN DRIVE

City MORRISTOWN State NJ Zip Code 07960-4748

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

Name of Employer COVANTA ENERGY Occupation BUSINESS DEVELOPMENT

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
 05 / 21 / 2012

Transaction ID : SA11.6000

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 3500.00

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 89
	<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. DARWIN REEDY
Full Name (Last, First, Middle Initial)

Mailing Address 51 PENINSULA ROAD

City DELLWOOD State MN Zip Code 55110-1504

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2012

Transaction ID : SA11.6018

Amount of Each Receipt this Period
 3000.00

CONTRIBUTION

B. DICK WISEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 10701 PICKFAIR DRIVE

City AUSTIN State TX Zip Code 78750-3701

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

Name of Employer SELF-EMPLOYED Occupation MEDICAL DOCTOR

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
 05 / 21 / 2012

Transaction ID : SA11.6017

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. BRENDA SUSAN DUFF
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 305

City CHAVIES State KY Zip Code 41727-0305

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

Name of Employer PINE BRANCH COAL SALE, INC. Occupation COAL MINING

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5010.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 22 / 2012

Transaction ID : SA11.6025

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 89
	<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. DALE FRUMAN

Mailing Address 3002 HILLCREST LANE

City EXPORT State PA Zip Code 15632-9392

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

Name of Employer CRCSI INC Occupation PHYSICIAN

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
 05 / 22 / 2012
Transaction ID : SA11.6026

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DENNIS KOZAK

Mailing Address 8 MCILVAIN DRIVE

City DOWNINGTOWN State PA Zip Code 19335-3335

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
 05 / 23 / 2012
Transaction ID : SA11.5974

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 350 BLALOCK COURT

City RICHLAND State WA Zip Code 99352-7680

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 ▼
50000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 24 / 2012
Transaction ID : SA11.5967

Amount of Each Receipt this Period
50000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	50750.00
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 89
	<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. GREGORY B. MAFFEI
Full Name (Last, First, Middle Initial)

Mailing Address 4175 S. HUMBOLDT ST.

City State Zip Code
CHERRY HILLS VILLAGE CO 80113-4818

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

Name of Employer Occupation
LIBERTY MEDIA PRESIDENT AND CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
05 / 24 / 2012
Transaction ID : SA11.5966

Amount of Each Receipt this Period
50000.00

CONTRIBUTION

B. TONY MCKINNIS
Full Name (Last, First, Middle Initial)

Mailing Address 11709 CANTERBURY CT.

City State Zip Code
LEAWOOD KS 66211-2928

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

Name of Employer Occupation
ENTERPRISES HOLDINGS MANAGER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
05 / 24 / 2012
Transaction ID : SA11.5965

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. LESLIE EDGCOMB III
Full Name (Last, First, Middle Initial)

Mailing Address 7 CATHEDRAL OAKS

City State Zip Code
FAIRPORT NY 14450-4215

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

Name of Employer Occupation
RBC INVESTMENTS

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
05 / 25 / 2012
Transaction ID : SA11.6142

Amount of Each Receipt this Period
100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 50600.00

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 89
	<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. JERRY GRUNDHOFER
Full Name (Last, First, Middle Initial)

Mailing Address 9811 WEST CHARLESTON BLVD
SUITE 2-163

City LAS VEGAS State NV Zip Code 89117-7528

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 ▼
10000.00

Date of Receipt
05 / 25 / 2012
Transaction ID : SA11.6143

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

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

Mailing Address 6502 ABILENE TRAIL

City AUSTIN State TX Zip Code 78749-3420

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

Name of Employer BAER ENGINEERING Occupation ENGINEER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
05 / 25 / 2012
Transaction ID : SA11.6141

Amount of Each Receipt this Period
500.00

CONTRIBUTION

C. ROSEMARY SISSONS
Full Name (Last, First, Middle Initial)

Mailing Address 6309 E. VERMONT STREET

City LONG BEACH State CA Zip Code 90803-2224

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

Name of Employer LONG BEACH UNIFIED SCHOOL DISTRICT Occupation TEACHER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
05 / 26 / 2012
Transaction ID : SA11.6145

Amount of Each Receipt this Period
250.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	10750.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 89
	<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 SIMMS

Mailing Address 47 LUCKY LEAF CT.

City THE WOODLANDS State TX Zip Code 77381-3852

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

Name of Employer FORUM ENERGY TECHNOLOGIES, INC. Occupation TREASURER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 27 / 2012

Transaction ID : SA11.6150

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

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

Mailing Address P.O. BOX 1915

City GLENWOOD SPRINGS State CO Zip Code 81602-1915

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

Name of Employer PITKIN IRON CORP Occupation BOOKKEEPER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 28 / 2012

Transaction ID : SA11.6124

Amount of Each Receipt this Period 100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. CHARLES R. HAMIL

Mailing Address 5910 W LONEWOLF AVE

City SPOKANE State WA Zip Code 99208-9311

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

Name of Employer DASH CONNECTOR TECHNOLOGY, INC Occupation QA MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 28 / 2012

Transaction ID : SA11.6123

Amount of Each Receipt this Period 100.00

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 35 OF 89
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Crossroads

A. DAVID O BERRYMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 3710 6TH AVENUE
 City TACOMA State WA Zip Code 98406-4902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GOLDMASTERS PRECIOUS METALS Occupation PRECIOUS METALS DEALER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2012
Transaction ID : SA11.6098
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

B. ANTHONY J. CIGANEK
 Full Name (Last, First, Middle Initial)
 Mailing Address 233 HEATH CT.
 City BARRINGTON State IL Zip Code 60010-4822
 FEC ID number of contributing federal political committee. **C**
 Name of Employer BAXTER INTERNATIONAL Occupation SENIOR DIRECTOR OF ENGINEERING
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 30 / 2012
Transaction ID : SA11.6070
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

C. DEREK DUKE
 Full Name (Last, First, Middle Initial)
 Mailing Address 77 KITTANSETT LOOP
 City HENDERSON State NV Zip Code 89052-6694
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SELF-EMPLOYED Occupation NEUROSURGEON
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 30 / 2012
Transaction ID : SA11.6115
 Amount of Each Receipt this Period 250.00
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 36 OF 89
(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. DON ELLIOTT

Mailing Address 104 GRIST MILL TERRACE

City State Zip Code
SPARTANBURG SC 29307-1783

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

Name of Employer Occupation
PIZZA HUT DELIVERY DRIVER

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
 05 / 30 / 2012
Transaction ID : SA11.6135

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 2061 FAIRWAY CROSSING DRIVE

City State Zip Code
WOODSTOCK GA 30188-3520

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
 05 / 30 / 2012
Transaction ID : SA11.6134

Amount of Each Receipt this Period
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. RICHARD FOWNES

Mailing Address 901 PONCE DE LEON BLVD
SUITE 505

City State Zip Code
CORAL GABLES FL 33134-3070

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

Name of Employer Occupation
HAYDEGAR ADVISORS, LLC MANAGER

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
 05 / 30 / 2012
Transaction ID : SA11.6107

Amount of Each Receipt this Period
2500.00

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 37 OF 89
	<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. KATIE KESIC
Full Name (Last, First, Middle Initial)

Mailing Address 7632 SUGAR BUSH TRAIL

City HUDSON State OH Zip Code 44236-1940

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

Name of Employer SELF-EMPLOYED Occupation EXECUTIVE SEARCH

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
 05 / 30 / 2012

Transaction ID : SA11.6108

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 2040 E. BELL RD, STE. 140

City PHOENIX State AZ Zip Code 85022-2937

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

Name of Employer EMERGENCY CHIROPRACTIC Occupation CHIROPRACTOR

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
 05 / 30 / 2012

Transaction ID : SA11.6105

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

C. PATRICIA M. O'BRIEN
Full Name (Last, First, Middle Initial)

Mailing Address 535 E 86TH STREET
APT. 20D

City NEW YORK State NY Zip Code 10028-7533

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
 05 / 30 / 2012

Transaction ID : SA11.6071

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 89
	<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. DR LARRY J OESTERLE
Full Name (Last, First, Middle Initial)

Mailing Address 11693 E LAKE PLACE

City ENGLEWOOD State CO Zip Code 80111-5849

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

Name of Employer UNIVERSITY OF COLORADO Occupation PROFESSOR

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
 05 / 30 / 2012

Transaction ID : SA11.6096

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

B. DUANE L. OTTENSTROER
Full Name (Last, First, Middle Initial)

Mailing Address 10739 DEERWOOD PARK BLVD SUITE 310

City JACKSONVILLE State FL Zip Code 32256-4837

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

Name of Employer EVENTIDE INVESTMENTS Occupation INVESTOR

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
 05 / 30 / 2012

Transaction ID : SA11.6077

Amount of Each Receipt this Period
 10000.00

CONTRIBUTION

C. HERBERT H. PEYTON
Full Name (Last, First, Middle Initial)

Mailing Address 9540 SAN JOSE BLVD

City JACKSONVILLE State FL Zip Code 32257-5432

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

Name of Employer GATE PETROLEUM Occupation EXECUTIVE

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
 05 / 30 / 2012

Transaction ID : SA11.6078

Amount of Each Receipt this Period
 10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 20500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 89
	<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. CHARLES SCRIPPS
Full Name (Last, First, Middle Initial)

Mailing Address 52 COAL CREEK RD
SUITE 400

City DARBY State MT Zip Code 59829-9676

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 ▼
1600.00

Date of Receipt
05 / 30 / 2012
Transaction ID : SA11.6257

Amount of Each Receipt this Period
1600.00

CONTRIBUTION

B. CROW HOLDINGS, L.L.C. - DISTRIBUTION
Full Name (Last, First, Middle Initial)

Mailing Address 3819 MAPLE AVENUE

City DALLAS State TX Zip Code 75219-3913

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

Name of Employer N/A Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000000.00

Date of Receipt
05 / 30 / 2012
Transaction ID : SA11.6072

Amount of Each Receipt this Period
1000000.00

CONTRIBUTION

C. PENTAGON PROPERTIES, LLC
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 47050

City JACKSONVILLE State FL Zip Code 32247-7050

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

Name of Employer N/A Occupation N/A

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
05 / 30 / 2012
Transaction ID : SA11.6079

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 1011600.00

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 40 OF 89
	<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. JOE CRAFT
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 ALLIANCE HOLDINGS GP, L.P.	Occupation CHAIRMAN, PRESIDENT, AND CEO
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2012

Transaction ID : SA11.6094

Amount of Each Receipt this Period
1250000.00

CONTRIBUTION

B. TONI ISOLA-BAYER
Full Name (Last, First, Middle Initial)
Mailing Address 12155 AGATE RD

City EAGLE POINT	State OR	Zip Code 97524-6556
---------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation RANCHER
-----------------------------------	-----------------------

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
05	/	31	/	2012

Transaction ID : SA11.6202

Amount of Each Receipt this Period
500.00

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

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	31	/	2012

Transaction ID : SA11.6161

Amount of Each Receipt this Period
50000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1300500.00
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 41 OF 89
	<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 F. PETWAY III
 Full Name (Last, First, Middle Initial)
 Mailing Address 375 ATLANTIC BLVD.
 SUITE 200
 City ATLANTIC BEACH State FL Zip Code 32233-5277
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ZURICH INSURANCE SERVICES Occupation CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 05 / 31 / 2012
Transaction ID : SA11.6090
 Amount of Each Receipt this Period 25000.00
 CONTRIBUTION

B. MICHAEL SMITH
 Full Name (Last, First, Middle Initial)
 Mailing Address 6134 WILLERS WAY
 City HOUSTON State TX Zip Code 77057-2806
 FEC ID number of contributing federal political committee. **C**
 Name of Employer SOURCE ROCK RESOURCES, INC. Occupation OIL AND GAS EXPLORATION
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 31 / 2012
Transaction ID : SA11.6199
 Amount of Each Receipt this Period 500.00
 CONTRIBUTION

C. NICHOLAS K. TAUBMAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 2965 COLONNADE DR
 STE 300
 City ROANOKE State VA Zip Code 24018-3541
 FEC ID number of contributing federal political committee. **C**
 Name of Employer MOZART INVESTMENTS Occupation INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 05 / 31 / 2012
Transaction ID : SA11.6165
 Amount of Each Receipt this Period 100000.00
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 125500.00
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 42 OF 89
	<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. ANNE WARFEL		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 Transaction ID : SA11.6119
Mailing Address 1945 GERALDSON DR		Amount of Each Receipt this Period 250.00
City LANCASTER	State PA	Zip Code 17601-3642
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. SCOTT WOODSON		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 Transaction ID : SA11.6116
Mailing Address 7730 CAMINO SERENO		Amount of Each Receipt this Period 500.00
City ESCONDIDO	State CA	Zip Code 92029-4702
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer GCAS, INC.	Occupation ENGINEER	
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. ALLIANCE MANAGEMENT HOLDINGS		Date of Receipt MM / DD / YYYY 05 / 31 / 2012 Transaction ID : SA11.6091
Mailing Address P.O. BOX 22027		Amount of Each Receipt this Period 425000.00
City TULSA	State OK	Zip Code 74121-2027
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer N/A	Occupation N/A	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425000.00	

SUBTOTAL of Receipts This Page (optional).....▶	425750.00
TOTAL This Period (last page this line number only).....▶	4540700.00

**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. MERCHANT PAYMENT SERVICES

Mailing Address 7300 CHAPMAN HIGHWAY

City KNOXVILLE State TN Zip Code 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

MM / DD / YYYY
05 / 02 / 2012

Transaction ID : SB21B.I1689

Amount of Each Disbursement this Period

55.00

Full Name (Last, First, Middle Initial)

B. ANDREW FINNAN

Mailing Address 2130 P STREET NW #406

City WASHINGTON State DC Zip Code 20037-1017

Purpose of Disbursement
CONSULTING, MEDIA

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2012

Transaction ID : SB21B.I1602

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. 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

MM / DD / YYYY
05 / 03 / 2012

Transaction ID : SB21B.I1667

Amount of Each Disbursement this Period

5000.00

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

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

10055.00

**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. 1401 NEW YORK AVENUE INC

Mailing Address P.O. BOX 7247-7375

City PHILADELPHIA State PA Zip Code 19170

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

MM / DD / YYYY
05 / 03 / 2012

Transaction ID : SB21B.I1672

Amount of Each Disbursement this Period

3941.73

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

MM / DD / YYYY
05 / 03 / 2012

Transaction ID : SB21B.I1673

Amount of Each Disbursement this Period

3780.00

Full Name (Last, First, Middle Initial)

C. ALLIED TELECOM

Mailing Address 1120 20TH STREET NW, STE 500-S

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
INTERNET AND PHONE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2012

Transaction ID : SB21B.I1676

Amount of Each Disbursement this Period

30.00

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

7751.73

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

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

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

FOR LINE NUMBER:
(check only one)

<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

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
CONSULTING, ADVOCACY COMMUNICATION

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
0	5		0	3		2	0	1	2

Transaction ID : SB21B.I1629

Amount of Each Disbursement this Period

8	2	3	5	.	1	4
---	---	---	---	---	---	---

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	2

Transaction ID : SB21B.I1630

Amount of Each Disbursement this Period

6	3	4	.	8
---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. CAPITOL COMPUTER EXPERTS

Mailing Address 4487 FORBES BLVD

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	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	2

Transaction ID : SB21B.I1632

Amount of Each Disbursement this Period

1	3	7	.	8
---	---	---	---	---

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

9	0	0	7	.	7	8
---	---	---	---	---	---	---

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

9	0	0	7	.	7	8
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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. CFC CONSULTING INC

Mailing Address 3724 DUNBARTON DRIVE

City MOUNTAIN BROOK State AL Zip Code 35223

Purpose of Disbursement
BOOKKEEPING / COMPLIANCE

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
0	5		0	3		2	0	1	2

Transaction ID : SB21B.I1637

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	2

Transaction ID : SB21B.I1638

Amount of Each Disbursement this Period

2	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. FRANK PARSONS

Mailing Address P.O. BOX 791416

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement
OFFICE SUPPLIES

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
0	5		0	3		2	0	1	2

Transaction ID : SB21B.I1645

Amount of Each Disbursement this Period

4	0	9	1	1	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

6	4	0	9	1	1	0	0	0	0
---	---	---	---	---	---	---	---	---	---

6	4	0	9	1	1	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. 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
05	/	03	/	2012

Transaction ID : SB21B.I1655

Amount of Each Disbursement this Period

540.00

Full Name (Last, First, Middle Initial)

B. PNC BANK

Mailing Address ONE FINANCIAL PARKWAY

City State Zip Code
KALAMAZOO MI 49009

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
05	/	03	/	2012

Transaction ID : SB21B.I1695

Amount of Each Disbursement this Period

2263.16

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 M	/	D D D	/	Y Y Y Y Y
05	/	03	/	2012

Transaction ID : SB21B.I1731

Amount of Each Disbursement this Period

407.00

[MEMO ITEM]

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

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

2803.16

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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. 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
05 / 03 / 2012

Transaction ID : SB21B.I1732

Amount of Each Disbursement this Period

568.80

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address P.O. BOX 371461

City PITTSBURGH State PA Zip Code 15250

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
05 / 03 / 2012

Transaction ID : SB21B.I1733

Amount of Each Disbursement this Period

161.83

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. UNITED

Mailing Address P.O. BOX 66100

City CHICAGO State IL Zip Code 60666

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
05 / 03 / 2012

Transaction ID : SB21B.I1735

Amount of Each Disbursement this Period

398.30

[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. US AIRWAYS

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
0	5		0	3		2	0	1	2

Transaction ID : SB21B.11736

Amount of Each Disbursement this Period

5	9	8	.	1	0
---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. PRINCIPAL FINANCIAL GROUP

Mailing Address P.O. BOX 10372

City DES MOINES State IA Zip Code 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

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	3		2	0	1	2

Transaction ID : SB21B.11698

Amount of Each Disbursement this Period

2	7	7	.	8	7
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. ROCK CREEK ADVISORS LLC

Mailing Address 5331 16TH STREET NW

City WASHINGTON State DC Zip Code 20011

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
0	5		0	3		2	0	1	2

Transaction ID : SB21B.11701

Amount of Each Disbursement this Period

3	0	0	.	0	0
---	---	---	---	---	---

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

3	2	7	.	7	7
---	---	---	---	---	---

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

3	2	7	.	7	7
---	---	---	---	---	---

**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. TARGETED VICTORY

Mailing Address P.O. BOX 2187

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement
WEB VIDEO

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2012

Transaction ID : SB21B.I1703

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 3986

City WASHINGTON State DC Zip Code 20027

Purpose of Disbursement
VOID CK # 5732: REISSUED 05/03/12

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 03 / 2012

Transaction ID : SB21B.I1707

Amount of Each Disbursement this Period

-383.73

Full Name (Last, First, Middle Initial)

C. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 3986

City WASHINGTON State DC Zip Code 20027

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
05 / 03 / 2012

Transaction ID : SB21B.I1708

Amount of Each Disbursement this Period

383.73

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

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. THE LARRISON GROUP LLC

Mailing Address P.O. BOX 3986

City WASHINGTON State DC Zip Code 20027

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
05 / 03 / 2012

Transaction ID : **SB21B.I1709**

Amount of Each Disbursement this Period

7500.00

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) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 04 / 2012

Transaction ID : **SB21B.I1674**

Amount of Each Disbursement this Period

113.75

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

MM / DD / YYYY
05 / 04 / 2012

Transaction ID : **SB21B.I1716**

Amount of Each Disbursement this Period

100.00

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

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

7713.75

**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. AT&T DATA

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

/ /

Transaction ID : SB21B.I1738

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. AT&T DATA

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

/ /

Transaction ID : SB21B.I1739

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T DATA

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

/ /

Transaction ID : SB21B.I1740

Amount of Each Disbursement this Period

[MEMO ITEM]

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. AT&T DATA

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) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	4		2	0	1	2

Transaction ID : SB21B.I1741

Amount of Each Disbursement this Period

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

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. PNC BANK

Mailing Address ONE FINANCIAL PARKWAY

City State Zip Code
KALAMAZOO MI 49009

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) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	2

Transaction ID : SB21B.I1696

Amount of Each Disbursement this Period

1	0	1	6	.	3	2
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. US AIRWAYS

Mailing Address 4000 E. SKY HARBOR BLVD

City State Zip Code
PHOENIX AZ 85034

Purpose of Disbursement
AIRFARE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	1	2

Transaction ID : SB21B.I1746

Amount of Each Disbursement this Period

6	1	1	.	8	0
---	---	---	---	---	---

[MEMO ITEM]

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

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

1	0	1	6	.	3	2
---	---	---	---	---	---	---

1	0	1	6	.	3	2
---	---	---	---	---	---	---

**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. 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

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1656

Amount of Each Disbursement this Period

3236.84

Full Name (Last, First, Middle Initial)

B. AT&T DATA

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

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1717

Amount of Each Disbursement this Period

30.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. AT&T DATA

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

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1718

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

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

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

3236.84

**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 DATA

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

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1747

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. CAVA CATERING

Mailing Address 527 8TH STREET SE

City State Zip Code
WASHINGTON DC 20003

Purpose of Disbursement
MEETING EXPENSE - FOOD / BEVERAGE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1720

Amount of Each Disbursement this Period

211.10

[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

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1721

Amount of Each Disbursement this Period

1000.00

[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. CMDI

Mailing Address 7704 LEESBURG PIKE

City Falls Church State VA Zip Code 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

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1722

Amount of Each Disbursement this Period

500.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. FEDEX

Mailing Address P.O. BOX 371461

City Pittsburgh State PA Zip Code 15250

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
05 / 08 / 2012

Transaction ID : SB21B.I1724

Amount of Each Disbursement this Period

112.72

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. GEPETTO CATERING

Mailing Address 4505 QUEENSBURY ROAD

City Riverdale State MD Zip Code 20737

Purpose of Disbursement
MEETING EXPENSE - FOOD / BEVERAGE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1725

Amount of Each Disbursement this Period

501.36

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. PREMIERE GLOBAL SERVICES INC

Mailing Address 3399 PEACHTREE ROAD, STE 700

City ATLANTA State GA Zip Code 30326-2832

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

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1726

Amount of Each Disbursement this Period

673.58

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. US AIRWAYS

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

MM / DD / YYYY
05 / 08 / 2012

Transaction ID : SB21B.I1728

Amount of Each Disbursement this Period

25.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. 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

MM / DD / YYYY
05 / 10 / 2012

Transaction ID : SB21B.I1687

Amount of Each Disbursement this Period

5063.00

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

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

5063.00

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

Use separate schedule(s)
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Detailed Summary Page

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

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NAME OF COMMITTEE (In Full)
American Crossroads

Full Name (Last, First, Middle Initial)

A. CAPITOL COMPUTER EXPERTS

Mailing Address 4487 FORBES BLVD

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
05 / 10 / 2012

Transaction ID : SB21B.I1633

Amount of Each Disbursement this Period

275.60

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y
05 / 10 / 2012

Transaction ID : SB21B.I1648

Amount of Each Disbursement this Period

7500.00

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

Disbursement For:
 Primary General
 Other (specify) ▼

State: District: 00

Date of Disbursement

M M M / D D D / Y Y Y Y Y
05 / 10 / 2012

Transaction ID : SB21B.I1649

Amount of Each Disbursement this Period

4500.00

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

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

12275.60

**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. KANTAR MEDIA

Mailing Address P.O. BOX 7247-9301

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

MM / DD / YYYY
05 / 10 / 2012

Transaction ID : SB21B.I1650

Amount of Each Disbursement this Period

12500.00

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
05 / 10 / 2012

Transaction ID : SB21B.I1706

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

C. THE TARRANCE GROUP INC

Mailing Address 201 N. UNION STREET, STE 410

City ALEXANDRIA State VA Zip Code 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

MM / DD / YYYY
05 / 10 / 2012

Transaction ID : SB21B.I1711

Amount of Each Disbursement this Period

950.29

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

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

19450.29

**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. 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 M / D D D / Y Y Y Y Y Y
05 / 10 / 2012

Transaction ID : SB21B.I1657

Amount of Each Disbursement this Period

392.30

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

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2012

Transaction ID : SB21B.I1609

Amount of Each Disbursement this Period

1102.52

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

M M M / D D D / Y Y Y Y Y Y
05 / 15 / 2012

Transaction ID : SB21B.I1620

Amount of Each Disbursement this Period

1283.34

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

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

2778.16

**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. 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
05 / 15 / 2012

Transaction ID : SB21B.I1614

Amount of Each Disbursement this Period

689.49

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
05 / 15 / 2012

Transaction ID : SB21B.I1611

Amount of Each Disbursement this Period

1654.25

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
05 / 15 / 2012

Transaction ID : SB21B.I1665

Amount of Each Disbursement this Period

466.20

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

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

2809.94

**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. 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
05 / 15 / 2012

Transaction ID : SB21B.I1668

Amount of Each Disbursement this Period

3056.43

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
05 / 15 / 2012

Transaction ID : SB21B.I1600

Amount of Each Disbursement this Period

2398.12

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
05 / 15 / 2012

Transaction ID : SB21B.I1607

Amount of Each Disbursement this Period

4079.32

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

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

9533.87

**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. 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

MM / DD / YYYY
05 / 15 / 2012

Transaction ID : **SB21B.I1618**

Amount of Each Disbursement this Period

1336.58

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

MM / DD / YYYY
05 / 15 / 2012

Transaction ID : **SB21B.I1661**

Amount of Each Disbursement this Period

1721.63

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
05 / 15 / 2012

Transaction ID : **SB21B.I1603**

Amount of Each Disbursement this Period

1160.60

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

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

4218.81

**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. 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

MM / DD / YYYY
05 / 15 / 2012

Transaction ID : **SB21B.I1616**

Amount of Each Disbursement this Period

1415.21

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
05 / 15 / 2012

Transaction ID : **SB21B.I1624**

Amount of Each Disbursement this Period

337.89

Full Name (Last, First, Middle Initial)

C. KARA OSBORNE

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
05 / 15 / 2012

Transaction ID : **SB21B.I1622**

Amount of Each Disbursement this Period

645.29

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

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

2398.39

**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

/ /

Transaction ID : **SB21B.I1605**

Amount of Each Disbursement this Period

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

/ /

Transaction ID : **SB21B.I1659**

Amount of Each Disbursement this Period

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

/ /

Transaction ID : **SB21B.I1670**

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. 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
05 / 15 / 2012

Transaction ID : **SB21B.I1663**

Amount of Each Disbursement this Period

1628.67

Full Name (Last, First, Middle Initial)

B. KIRK WHITWORTH

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
05 / 15 / 2012

Transaction ID : **SB21B.I1626**

Amount of Each Disbursement this Period

876.35

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
05 / 15 / 2012

Transaction ID : **SB21B.I1639**

Amount of Each Disbursement this Period

109.31

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

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

2614.33

**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. DEPARTMENT OF EMPLOYMENT SERVICES

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	2

Mailing Address P.O. BOX 9664

Transaction ID : SB21B.I1642

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.	0	0
---	---	---	---	---	---	---	---	---	---	---	---	---

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. MISSISSIPPI DEPT OF REVENUE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	2

Mailing Address P.O. BOX 23075

Transaction ID : SB21B.I1690

City JACKSON State MS Zip Code 39225

Amount of Each Disbursement this Period

7	8	.	0	0
---	---	---	---	---

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. OFFICE OF TAX AND REVENUE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	1	2

Mailing Address P.O. BOX 96385

Transaction ID : SB21B.I1693

City WASHINGTON State DC Zip Code 20090

Amount of Each Disbursement this Period

1	5	6	6	.	7	4
---	---	---	---	---	---	---

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)..... ▶

1	7	6	7	.	7	4
---	---	---	---	---	---	---

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

1	7	6	7	.	7	4
---	---	---	---	---	---	---

**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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2012

Mailing Address 1500 PENNSYLVANIA AVE NW

Transaction ID : SB21B.I1712

City WASHINGTON State DC Zip Code 20220

Amount of Each Disbursement this Period

8735.43

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. VIRGINIA DEPT OF TAXATION

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		15		2012

Mailing Address P.O. BOX 1777

Transaction ID : SB21B.I1714

City RICHMOND State VA Zip Code 23218

Amount of Each Disbursement this Period

259.47

Purpose of Disbursement
PAYROLL TAXES

--

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. HEATHER HENDERSON

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		17		2012

Mailing Address 1401 NEW YORK AVE NW, STE 1200

Transaction ID : SB21B.I1612

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

200.00

Purpose of Disbursement
PETTY CASH

--

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

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

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

9194.90

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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. ALLIED TELECOM

Mailing Address 1120 20TH STREET NW, STE 500-S

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
INTERNET AND PHONE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2012

Transaction ID : SB21B.I1677

Amount of Each Disbursement this Period

1682.40

Full Name (Last, First, Middle Initial)

B. CAPITOL COMPUTER EXPERTS

Mailing Address 4487 FORBES BLVD

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECHNICAL SUPPORT

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2012

Transaction ID : SB21B.I1634

Amount of Each Disbursement this Period

2061.00

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
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 17 / 2012

Transaction ID : SB21B.I1636

Amount of Each Disbursement this Period

9045.00

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

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

12788.40

**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. 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
05 / 17 / 2012

Transaction ID : SB21B.I1646

Amount of Each Disbursement this Period

248.01

Full Name (Last, First, Middle Initial)

B. KONICA MINOLTA BUSINESS SOLUTIONS

Mailing Address P.O. BOX 122366

City State Zip Code
DALLAS TX 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

M M M / D D D / Y Y Y Y Y Y
05 / 17 / 2012

Transaction ID : SB21B.I1651

Amount of Each Disbursement this Period

225.47

Full Name (Last, First, Middle Initial)

C. LEXISNEXIS

Mailing Address P.O. BOX 7247-7090

City State Zip Code
PHILADELPHIA PA 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
05 / 17 / 2012

Transaction ID : SB21B.I1652

Amount of Each Disbursement this Period

2553.54

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

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

3027.02

**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. 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

/ /

Transaction ID : SB21B.I1688

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. RICHARD SALES MEDIA LLC

Mailing Address 9010 S. 10TH ST.

City State Zip Code
PHOENIX AZ 85042

Purpose of Disbursement
WEB VIDEO

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.I1700

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. SYSTEM PARKING CORP

Mailing Address 2300 M ST NW #900

City State Zip Code
WASHINGTON DC 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

/ /

Transaction ID : SB21B.I1702

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. 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

MM / DD / YYYY
05 / 18 / 2012

Transaction ID : SB21B.I1675

Amount of Each Disbursement this Period

334.25

Full Name (Last, First, Middle Initial)

B. 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
05 / 22 / 2012

Transaction ID : SB21B.I1710

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

C. 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

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : SB21B.I1628

Amount of Each Disbursement this Period

299.50

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

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

8133.75

**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. 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
05 / 24 / 2012

Transaction ID : SB21B.I1631

Amount of Each Disbursement this Period

908.60

Full Name (Last, First, Middle Initial)

B. CAPITOL COMPUTER EXPERTS

Mailing Address 4487 FORBES BLVD

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER TECH SUPPORT / OFFICE EQUIP

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : SB21B.I1635

Amount of Each Disbursement this Period

2521.97

Full Name (Last, First, Middle Initial)

C. FLS CONNECT LLC

Mailing Address 7300 HUDSON BLVD N, 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

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : SB21B.I1644

Amount of Each Disbursement this Period

334.47

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

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

3765.04

**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
05 / 24 / 2012

Transaction ID : SB21B.I1647

Amount of Each Disbursement this Period

137.27

Full Name (Last, First, Middle Initial)

B. LOCKTON COMPANIES LLC

Mailing Address P.O. BOX 415831

City State Zip Code
BOSTON MA 02241

Purpose of Disbursement
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
05 / 24 / 2012

Transaction ID : SB21B.I1653

Amount of Each Disbursement this Period

6947.00

Full Name (Last, First, Middle Initial)

C. MDC & ASSOCIATES INC

Mailing Address 11972 GREY OAKS PARK ROAD

City State Zip Code
GLEN ALLEN VA 23059

Purpose of Disbursement
BOOKKEEPING / COMPLIANCE

Candidate Name

Office Sought: House
 Senate
 President
State: District: 00

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
05 / 24 / 2012

Transaction ID : SB21B.I1654

Amount of Each Disbursement this Period

500.00

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

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

7584.27

**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. NMB RESEARCH

Mailing Address 206 N. FAYETTE STREET

City ALEXANDRIA State VA Zip Code 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

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : SB21B.I1692

Amount of Each Disbursement this Period

70500.00

Full Name (Last, First, Middle Initial)

B. PRINCIPAL FINANCIAL GROUP

Mailing Address P.O. BOX 10372

City DES MOINES State IA Zip Code 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

MM / DD / YYYY
05 / 24 / 2012

Transaction ID : SB21B.I1699

Amount of Each Disbursement this Period

489.05

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
05 / 31 / 2012

Transaction ID : SB21B.I1610

Amount of Each Disbursement this Period

1102.51

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

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

72091.56

**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
05 / 31 / 2012

Transaction ID : **SB21B.I1621**

Amount of Each Disbursement this Period

1283.35

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
05 / 31 / 2012

Transaction ID : **SB21B.I1615**

Amount of Each Disbursement this Period

689.51

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

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : **SB21B.I1613**

Amount of Each Disbursement this Period

1654.24

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

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

3627.10

**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
05 / 31 / 2012

Transaction ID : SB21B.I1666

Amount of Each Disbursement this Period

466.21

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
05 / 31 / 2012

Transaction ID : SB21B.I1669

Amount of Each Disbursement this Period

3056.44

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
05 / 31 / 2012

Transaction ID : SB21B.I1601

Amount of Each Disbursement this Period

2398.12

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

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

5920.77

**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.I1608

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.I1619

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.I1662

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
05 / 31 / 2012

Transaction ID : SB21B.I1604

Amount of Each Disbursement this Period

1160.59

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

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SB21B.I1617

Amount of Each Disbursement this Period

1415.21

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
05 / 31 / 2012

Transaction ID : SB21B.I1625

Amount of Each Disbursement this Period

337.36

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

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

2913.16

**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. KARA OSBORNE

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
05 / 31 / 2012

Transaction ID : SB21B.I1623

Amount of Each Disbursement this Period

645.29

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
05 / 31 / 2012

Transaction ID : SB21B.I1606

Amount of Each Disbursement this Period

1383.74

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
05 / 31 / 2012

Transaction ID : SB21B.I1660

Amount of Each Disbursement this Period

1156.40

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

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

3185.43

**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
05 / 31 / 2012

Transaction ID : SB21B.I1671

Amount of Each Disbursement this Period

1236.97

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
05 / 31 / 2012

Transaction ID : SB21B.I1664

Amount of Each Disbursement this Period

1628.66

Full Name (Last, First, Middle Initial)

C. KIRK WHITWORTH

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
05 / 31 / 2012

Transaction ID : SB21B.I1627

Amount of Each Disbursement this Period

1230.75

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

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

4096.38

**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. 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
05 / 31 / 2012

Transaction ID : SB21B.I1640

Amount of Each Disbursement this Period

109.31

Full Name (Last, First, Middle Initial)

B. DEPARTMENT OF EMPLOYMENT SERVICES

Mailing Address P.O. BOX 9664

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
05 / 31 / 2012

Transaction ID : SB21B.I1643

Amount of Each Disbursement this Period

123.33

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
05 / 31 / 2012

Transaction ID : SB21B.I1691

Amount of Each Disbursement this Period

78.00

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

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

310.64

**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
05 / 31 / 2012

Transaction ID : SB21B.I1694

Amount of Each Disbursement this Period

1543.04

Full Name (Last, First, Middle Initial)

B. 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

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : SB21B.I1658

Amount of Each Disbursement this Period

8153.00

Full Name (Last, First, Middle Initial)

C. PNC BANK

Mailing Address ONE FINANCIAL PARKWAY

City KALAMAZOO State MI Zip Code 49009

Purpose of Disbursement
BANK FEE

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2012

Transaction ID : SB21B.I1697

Amount of Each Disbursement this Period

220.95

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

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

9916.99

**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. 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

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SB21B.I1713

Amount of Each Disbursement this Period

8681.91

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

M M M / D D D / Y Y Y Y Y Y
05 / 31 / 2012

Transaction ID : SB21B.I1715

Amount of Each Disbursement this Period

282.47

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

Amount of Each Disbursement this Period

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

8964.38

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

293025.02

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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 GENERATION

Mailing Address 5013 COACHMAN'S CARRIAGE TERRACE

City State Zip Code
GLEN ALLEN VA 23059

Purpose of Disbursement
CONTRIBUTION - INDEPENDENT POLITICAL COMMITTEE

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
05	/	14	/	2012

Transaction ID : SB21B.I1641

Amount of Each Disbursement this Period

150000.00

B.

Full Name (Last, First, Middle Initial)

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

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

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

Amount of Each Disbursement this Period

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

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

150000.00

150000.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00487363 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee RICHARD SALES MEDIA LLC		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 05 / 03 / 2012 </div>
Mailing Address 9010 S. 10TH ST.		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 1000.00 </div>
City PHOENIX State AZ Zip Code 85042	Transaction ID : E.001	
Purpose of Expenditure WEB VIDEO	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 24000.00 </div>		2012

Full Name (Last, First, Middle Initial) of Payee TARGETED VICTORY		Date <div style="border: 1px solid black; padding: 2px; display: inline-block;"> M M M / D D D / Y Y Y Y Y Y 05 / 08 / 2012 </div>
Mailing Address P.O. BOX 2187		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 7500.00 </div>
City ARLINGTON State VA Zip Code 22202	Transaction ID : E.003	
Purpose of Expenditure WEB ADS	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 24000.00 </div>		2012

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> 8500.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

 Signature

CALEB CROSBY [Electronically Filed] Date
M M M / D D D / Y Y Y Y Y Y
 06 / 20 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee TARGETED VICTORY		Date MM / DD / YYYY 05 / 08 / 2012
Mailing Address P.O. BOX 2187		Amount 7500.00
City ARLINGTON	State VA	
Zip Code 22202	Transaction ID : E.002	
Purpose of Expenditure WEB ADS	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 24000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee ARENA		Date MM / DD / YYYY 05 / 21 / 2012
Mailing Address 1780 W. SEQUOIA VISTA CIRCLE		Amount 33084.00
City SALT LAKE CITY	State UT	
Zip Code 84104	Transaction ID : E.004	
Purpose of Expenditure POSTAGE, PRINTING / PRODUCTION	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RONALD BARBER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 165420.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) SPECIAL GENERAL

(a) SUBTOTAL of Itemized Independent Expenditures.....	40584.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CALEB CROSBY

Signature _____ [Electronically Filed] Date MM / DD / YYYY **05 / 09 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee ARENA		Date MM / DD / YYYY 05 / 23 / 2012
Mailing Address 1780 W. SEQUOIA VISTA CIRCLE		Amount 33084.00
City SALT LAKE CITY	State UT	
Zip Code 84104	Transaction ID : E.005	
Purpose of Expenditure POSTAGE, PRINTING / PRODUCTION	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RONALD BARBER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 165420.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL GENERAL

Full Name (Last, First, Middle Initial) of Payee ARENA		Date MM / DD / YYYY 05 / 25 / 2012
Mailing Address 1780 W. SEQUOIA VISTA CIRCLE		Amount 33084.00
City SALT LAKE CITY	State UT	
Zip Code 84104	Transaction ID : E.006	
Purpose of Expenditure POSTAGE, PRINTING / PRODUCTION	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RONALD BARBER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 165420.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) ► SPECIAL GENERAL

(a) SUBTOTAL of Itemized Independent Expenditures.....	66168.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

CALEB CROSBY

Signature _____ [Electronically Filed] Date **06 / 20 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Crossroads	FEC IDENTIFICATION NUMBER ▼ C C00487363
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee ARENA	Date M M / D D / Y Y Y Y Y Y 05 / 30 / 2012
Mailing Address 1780 W. SEQUOIA VISTA CIRCLE	Amount 33084.00
City State Zip Code SALT LAKE CITY UT 84104	
Purpose of Expenditure POSTAGE, PRINTING / PRODUCTION	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: JESSE KELLY	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 165420.00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) SPECIAL GENERAL

Transaction ID : E.007

Full Name (Last, First, Middle Initial) of Payee ARENA	Date M M / D D / Y Y Y Y Y Y 05 / 31 / 2012
Mailing Address 1780 SEQUOIA VISTA CIRCLE	Amount 33084.00
City State Zip Code SALT LAKE CITY UT 84101	
Purpose of Expenditure POSTAGE, PRINTING / PRODUCTION	Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure: JESSE KELLY	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 165420.00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input checked="" type="checkbox"/> Other (specify) SPECIAL GENERAL

Transaction ID : E.008

(a) SUBTOTAL of Itemized Independent Expenditures.....	66168.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	181420.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature CALEB CROSBY [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
06 / 20 / 2012