

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 CROSSROADS MEDIA LLC		Date MM / DD / YYYY 10 / 26 / 2012
Mailing Address 66 CANAL CENTER PLAZA, SUITE 555		Amount 9806703.95
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : E.19	
Purpose of Expenditure TV/MEDIA PLACEMENT-SEE NOTICE FILED 10/30/12, AMENDED 11/03/12	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 91149491.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee CROSSROADS MEDIA LLC		Date MM / DD / YYYY 10 / 26 / 2012
Mailing Address 66 CANAL CENTER PLAZA, SUITE 555		Amount 1782761.59
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : E.20	
Purpose of Expenditure TV/MEDIA PLACEMENT-SEE NOTICE FILED 10/30/12, AMENDED 12/06/12	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 91149491.99		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	11589465.54
(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 **12 / 06 / 2012**