

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

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

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

5. Covering Period  /  /  through  /  /

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

Type or Print Name of Treasurer Caleb Crosby

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Crossroads

Report Covering the Period: From:   /   To:   /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="YYYY"/> <input type="text" value="2012"/>		<input type="text" value="15592293.37"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15766028.05"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="11663175.43"/>	<input type="text" value="61722917.59"/>
(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="27429203.48"/>	<input type="text" value="77315210.96"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="21005477.87"/>	<input type="text" value="70891485.35"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="6423725.61"/>	<input type="text" value="6423725.61"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

Write or Type Committee Name

**American Crossroads**

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

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	11628160.00	61527619.60
(ii) Unitemized .....	34087.23	169317.54
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	11662247.23	61696937.14
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8820.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	11662247.23	61705757.14
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).....	928.20	17160.45
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))..... ▶	11663175.43	61722917.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	11663175.43	61722917.59

**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 .....	-12132367.05	8206897.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	-12132367.05	8206897.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	200000.00
24. Independent Expenditures (use Schedule E) .....	33087844.92	62079287.54
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	255300.00
(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	255300.00
29. Other Disbursements .....	50000.00	150000.00
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)) ..	21005477.87	70891485.35
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21005477.87	70891485.35

**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) .....	11662247.23	61705757.14
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	255300.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	11662247.23	61450457.14
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	-12132367.05	8206897.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	928.20	17160.45
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-12133295.25	8189737.36

: 97 `A-G79 @C B9CI G`H9LH`F9 @ 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: (check only one)	PAGE 7 OF 167
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)  
**A. RUSSELL ABBOTT**

Mailing Address 14701 BARTRAM PARK BLVD.

City JACKSONVILLE	State FL	Zip Code 32258-5285
----------------------	-------------	------------------------

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	/	D D	/	Y Y Y Y
10		01		2012

**Transaction ID : SA11.10080**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 6353 WEST MACLAURIN DRIVE

City TAMPA	State FL	Zip Code 33647-1160
---------------	-------------	------------------------

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

Name of Employer RAD ASSOC OF WEST FLORIDA	Occupation RADIOLOGIST
---	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		01		2012

**Transaction ID : SA11.10113**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DWIGHT CHAPIN**

Mailing Address P.O. BOX 5032

City EAST HAMPTON	State NY	Zip Code 11937-6021
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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 ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		01		2012

**Transaction ID : SA11.10056**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. ARTHUR COOPER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1140 MARION AVE  
 City State Zip Code  
 MCLEAN VA 22101-2952  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 GLADSTONEMANAGEMENT R/E  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2012  
**Transaction ID : SA11.10119**  
 Amount of Each Receipt this Period  
 750.00  
 CONTRIBUTION

**B. STEPHEN CORD M.D.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 406 TOPEKA  
 City State Zip Code  
 LUBBOCK TX 79416-4906  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2012  
**Transaction ID : SA11.10121**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**C. JESSE COX**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5 FIELDSTREAM COURT  
 City State Zip Code  
 LUTHERVILLE MD 21093-4737  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SNYDER & SNYDER 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  
 10 / 01 / 2012  
**Transaction ID : SA11.10074**  
 Amount of Each Receipt this Period  
 50.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1050.00  
**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 167  
(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. BRIAN DUNCAN**

Mailing Address 2332 EVERGREEN ST

City PAMPA State TX Zip Code 79065-2901

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

Name of Employer SELF-EMPLOYED Occupation INSURANCE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **900.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2012  
**Transaction ID : SA11.10068**

Amount of Each Receipt this Period  
**100.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. WILLIAM KIMMINS**

Mailing Address 16 COUNTRY CLUB WOODS DR.

City SAINT CHARLES State MO Zip Code 63303-3300

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  
 10 / 01 / 2012  
**Transaction ID : SA11.10081**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BARRY KNISPEL**

Mailing Address 28 BURNING HOLLOW RD

City SADDLE RIVER State NJ Zip Code 07458-2939

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2012  
**Transaction ID : SA11.10133**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3100.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 OF 167
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. MALCOLM MCIVER**  
Full Name (Last, First, Middle Initial)

Mailing Address 7860 SW NORTHVALE WAY

City PORTLAND	State OR	Zip Code 97225-1552
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FEC ID number of contributing federal political committee. **C**

Name of Employer COMMERCE PROPERTIES	Occupation REAL ESTATE
---	---------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		01		2012

**Transaction ID : SA11.10109**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B. LAURA MURPHY**  
Full Name (Last, First, Middle Initial)

Mailing Address 8220 NESBIT FERRY

City ATLANTA	State GA	Zip Code 30350-1012
-----------------	-------------	------------------------

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

Name of Employer EPS	Occupation HEALTHCARE
-------------------------	--------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		01		2012

**Transaction ID : SA11.10077**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. SUZANNE SHEPPARD**  
Full Name (Last, First, Middle Initial)

Mailing Address 1421 34TH AVE

City SEATTLE	State WA	Zip Code 98122-3333
-----------------	-------------	------------------------

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

Name of Employer EXECUTIVE CONVERSATION, INC.	Occupation CEO
--	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		01		2012

**Transaction ID : SA11.10138**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<b>TOTAL</b> 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 167
	<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. TERI SMITH**

Mailing Address 3600 CAMELIA STREET

City SEAL BEACH State CA Zip Code 90740-2821

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

Name of Employer ARTIO GLOBAL INVESTORS Occupation DIRECTOR OF CLIENT SERVICE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2012  
**Transaction ID : SA11.10082**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ANDERS ALBERTSEN**

Mailing Address 1980 W CAYMAN RD

City VERO BEACH State FL Zip Code 32963-4535

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  
 10 / 02 / 2012  
**Transaction ID : SA11.10169**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. JAMES ALBRIGHT**

Mailing Address 104 NEWMAN ROAD

City SCOTIA State NY Zip Code 12302-9517

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

Name of Employer GENERATORTECH, INC. Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2012  
**Transaction ID : SA11.10205**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1750.00
<b>TOTAL</b> 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 12 OF 167  
(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. DIANE CIVETTA**

Mailing Address 146 BREWSTER ROAD

City SCARSDALE      State NY      Zip Code 10583-2022

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  
M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2012  
**Transaction ID : SA11.10209**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MARILYN DEGAN**

Mailing Address 15520 75TH PL W

City EDMONDS      State WA      Zip Code 98026-4036

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

Name of Employer: **PREMIER ORTHO**      Occupation: **NURSE PRACTITIONER**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2012  
**Transaction ID : SA11.10235**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. CARLETON FALZONE**

Mailing Address 6441 COTTLE

City SAN JOSE      State CA      Zip Code 95123-5629

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

Name of Employer: **LAWRENCE BERKELEY NATIONAL LAB**      Occupation: **EHS TECHICIAN**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 02 / 2012  
**Transaction ID : SA11.10203**

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: (check only one)	PAGE 13 OF 167
	<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) <b>A. LUKE EBERLY FICHTHORN III</b>		Date of Receipt 10 / 02 / 2012 <b>Transaction ID : SA11.10170</b>
Mailing Address 430 COCONUT PALM ROAD		Amount of Each Receipt this Period 1000.00
City VERO BEACH	State FL	Zip Code 32963-3709
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 ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>B. PHILLIP FROST MD</b>		Date of Receipt 10 / 02 / 2012 <b>Transaction ID : SA11.10163</b>
Mailing Address 4400 BISCAYNE BLVD. SUITE 660		Amount of Each Receipt this Period 50000.00
City MIAMI	State FL	Zip Code 33137-3212
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer OPKO HEALTH INC.	Occupation CHAIRMAN AND CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 150000.00	

Full Name (Last, First, Middle Initial) <b>C. FLOYD D. GOTTWALD JR.</b>		Date of Receipt 10 / 02 / 2012 <b>Transaction ID : SA11.10188</b>
Mailing Address 300 HERNDON ROAD		Amount of Each Receipt this Period 50000.00
City RICHMOND	State VA	Zip Code 23229-8214
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 ▼ 100000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101000.00
<b>TOTAL</b> 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 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. VICTORIA HAMILTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1433 CORBETT RD  
 City MONKTON State MD Zip Code 21111-1518  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer UNEMPLOYED Occupation UNEMPLOYED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 02 / 2012  
**Transaction ID : SA11.10199**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**B. JACQUELINE HOOVER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8670 COUNTY ROAD 149  
 City MATHESON State CO Zip Code 80830-9411  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HOOVER HOLDINGS Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 02 / 2012  
**Transaction ID : SA11.10154**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. JEFFREY KALINA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2453 SOUTH BRAESWOOD  
 City HOUSTON State TX Zip Code 77030-4305  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 02 / 2012  
**Transaction ID : SA11.10214**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2250.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER: PAGE 15 OF 167  
(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. CANDI KUYKEDALL**

Mailing Address 2415 INLET DR

City State Zip Code  
FT. LAUDERDALE FL 33316-3621

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 02 / 2012  
**Transaction ID : SA11.10151**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CHARLES LEDERER**

Mailing Address 2905 WEST 125TH ST.

City State Zip Code  
LEAWOOD KS 66209-2427

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

Name of Employer Occupation  
ASSOCIATED OPHTHALMOLOGISTS PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 02 / 2012  
**Transaction ID : SA11.10142**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GREGG MACKEY**

Mailing Address P.O.Box 398

City State Zip Code  
BASALT CO 81621-0398

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

Name of Employer Occupation  
SELF-EMPLOYED CONSTRUCTION

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 02 / 2012  
**Transaction ID : SA11.10232**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 167
	<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) <b>A. WARNER MASON</b>		Date of Receipt 10 / 02 / 2012 <b>Transaction ID : SA11.10198</b>
Mailing Address 2 THICKET ROAD		Amount of Each Receipt this Period 2500.00
City BALTIMORE	State MD	Zip Code 21212-2460
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer WEBB/MASON	Occupation PRESIDENT	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) <b>B. RON MCBRIDE</b>		Date of Receipt 10 / 02 / 2012 <b>Transaction ID : SA11.10221</b>
Mailing Address 15285 WILLIAM DRIVE		Amount of Each Receipt this Period 250.00
City AUBURN	State CA	Zip Code 95602-9678
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>C. JOHN MORGAN</b>		Date of Receipt 10 / 02 / 2012 <b>Transaction ID : SA11.10228</b>
Mailing Address 18611 141ST AVE NE		Amount of Each Receipt this Period 250.00
City WOODINVILLE	State WA	Zip Code 98072-6828
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer MORFAB CO	Occupation MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 17 OF 167  
(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. JOE MURPHY**

Mailing Address **519 BLACKJACK OAK**

City **SHAVANO PARK** State **TX** Zip Code **78230-5637**

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

Name of Employer **MURPHY TOMATOES** Occupation **SALES**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
**10 / 02 / 2012**  
**Transaction ID : SA11.10166**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOHN C. SASSAMAN SR.**

Mailing Address **14826 AVENIDA DE PALMA**

City **WINTER GARDEN** State **FL** Zip Code **34787-8820**

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  
**10 / 02 / 2012**  
**Transaction ID : SA11.10187**

Amount of Each Receipt this Period  
**25.00**

CONTRIBUTION

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

Mailing Address **4507 RIDGEGATE DRIVE**

City **DULUTH** State **GA** Zip Code **30097-2321**

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

Name of Employer **BEECHER CARLSON INSURANCE SERVICES** Occupation **INSURANCE**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
**10 / 02 / 2012**  
**Transaction ID : SA11.10223**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► **1275.00**

**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 167
	<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. DAVID SUMEGA**

Mailing Address 2106 MAYFLY ST.

City LEBANON State OR Zip Code 97355-3975

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 ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2012  
**Transaction ID : SA11.10144**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 5250 ADVANCE MILLS RD

City EARLYSVILLE State VA Zip Code 22936-1830

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

Name of Employer SELF-EMPLOYED Occupation REAL ESTATE DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 02 / 2012  
**Transaction ID : SA11.10211**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GARY VENABLE**

Mailing Address 1498 HEMLOCK

City LIBERTY State MO Zip Code 64068-3723

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

Name of Employer ALL SYSTEMS Occupation CEO

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  
 10 / 02 / 2012  
**Transaction ID : SA11.10217**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1600.00
<b>TOTAL</b> 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 167
	<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. CHRISTOPHER F. EGAN LIVING TRUST**

Mailing Address 116 FLANDERS RD.  
SUITE 2000

City WESTBOROUGH State MA Zip Code 01581-1072

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 ▼  
50000.00

Date of Receipt  
10 / 02 / 2012  
**Transaction ID : SA11.10189**

Amount of Each Receipt this Period  
50000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MMMP, LLC**

Mailing Address 1020 LAKE SUMTER LANDING

City THE VILLAGES State FL Zip Code 32162-2699

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 ▼  
50000.00

Date of Receipt  
10 / 02 / 2012  
**Transaction ID : SA11.10190**

Amount of Each Receipt this Period  
50000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. STEVEN ALTMAN**

Mailing Address 213 E. CLINTON AVE.

City TENAFLY State NJ Zip Code 07670-2315

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  
10 / 03 / 2012  
**Transaction ID : SA11.10313**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	101000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 167
	<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**

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

Mailing Address 25 CHESTNUT ST.

City DEDHAM State MA Zip Code 02026-4105

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  
10 / 03 / 2012  
**Transaction ID : SA11.10271**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. GARY BOSMA**

Mailing Address 13603 AVE 160

City TIPTON State CA Zip Code 93272-9745

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

Name of Employer BOSMA MILK CO. Occupation DAIRYMAN/FARMER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11.10306**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. PAUL BREITHAUPT**

Mailing Address 2025 SWAN DR.

City COSTA MESA State CA Zip Code 92626-4741

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  
10 / 03 / 2012  
**Transaction ID : SA11.10318**

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: (check only one)	PAGE 21 OF 167
	<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. PEGGY CHILD SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 3147 BONNELL AVE

City GRAND RAPIDS State MI Zip Code 49506-3135

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: **10 / 03 / 2012**

**Transaction ID : SA11.10321**

Amount of Each Receipt this Period: **250.00**

CONTRIBUTION

**B. RANDY CRAWFORD**  
Full Name (Last, First, Middle Initial)

Mailing Address 6100 SHENANDOAH AVE.

City LOS ANGELES State CA Zip Code 90056-2021

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: **10 / 03 / 2012**

**Transaction ID : SA11.10302**

Amount of Each Receipt this Period: **1000.00**

CONTRIBUTION

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

Mailing Address 10110 DEL MONTE

City HOUSTON State TX Zip Code 77042-2434

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 ▼ **1400.00**

Date of Receipt: **10 / 03 / 2012**

**Transaction ID : SA11.10267**

Amount of Each Receipt this Period: **350.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1600.00**

**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 167
	<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. DAVIDE DUKCEVICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 489 ANGELL ROAD  
 City LINCORN State RI Zip Code 02865-4998  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DANIELE, INC. Occupation SALES  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **4000.00**

Date of Receipt **10 / 03 / 2012**  
**Transaction ID : SA11.10333**  
 Amount of Each Receipt this Period **3000.00**  
 CONTRIBUTION

**B. STEVEN ELLIS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 544 N. CHURCH STREET  
 City CHARLOTTE State NC Zip Code 28202-2208  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer WELLS FARGO SECURITIES, LLC Occupation INVESTMENT BANKER  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 03 / 2012**  
**Transaction ID : SA11.10247**  
 Amount of Each Receipt this Period **1000.00**  
 CONTRIBUTION

**C. GEORGE FISHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 98549  
 City DES MOINES State WA Zip Code 98198-0549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HUNTING, FISHER & CO., PS, C.P.A.'S Occupation ACCOUNTANT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **5000.00**

Date of Receipt **10 / 03 / 2012**  
**Transaction ID : SA11.10330**  
 Amount of Each Receipt this Period **2500.00**  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>6500.00</b>
<b>TOTAL</b> 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 167
	<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. ROBERT GANDEE**  
Full Name (Last, First, Middle Initial)

Mailing Address 8850 TYLER BLVD

City	State	Zip Code
MENTOR	OH	44060-4361

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

Name of Employer	Occupation
BACKTRACK INC	PRESIDENT/CEO

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
10		03		2012

**Transaction ID : SA11.10253**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**B. JIM HANSET**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 11350

City	State	Zip Code
PORTLAND	OR	97211-0350

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2012

**Transaction ID : SA11.10280**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**C. MARC KERALLA**  
Full Name (Last, First, Middle Initial)

Mailing Address 6113 ABERDEEN DR

City	State	Zip Code
PLANO	TX	75093-7926

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

Name of Employer	Occupation
BASE4 GROUP INC	PRESIDENT

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
10		03		2012

**Transaction ID : SA11.10292**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3600.00
<b>TOTAL</b> 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 167
	<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. BARRY KNIGHT**

Mailing Address 8901 FOREST RIDGE CV

City State Zip Code  
CORDOVA TN 38018-7622

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

Name of Employer Occupation  
JIMMY SANDERS MANAGER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11.10286**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BERNARD J. KOLBER**

Mailing Address 9421 HUNTING VALLEY ROAD S.

City State Zip Code  
CLARENCE NY 14031-2427

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

Name of Employer Occupation  
THE BUFFALO DENTAL GROUP DENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11.10312**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. SUSANNA LINAM**

Mailing Address 105 NORTHVIEW DR.

City State Zip Code  
BOERNE TX 78006-8991

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

Name of Employer Occupation  
SELF-EMPLOYED OIL AND GAS PRODUCTION

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11.10310**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 25 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. ROBERT MARSCHKE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1836 RIDGECREST DRIVE  
 City State Zip Code  
 FORT COLLINS CO 80524-1869  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PVHS-UCH PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 03 / 2012  
**Transaction ID : SA11.10341**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. PETER MCCARTHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1375 ENCLAVE PKWY  
 City State Zip Code  
 HOUSTON TX 77077-2026  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED VENTURE CAPITAL  
 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  
 10 / 03 / 2012  
**Transaction ID : SA11.10334**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C. GERALD MCINVALE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 116 WINDRIDGE  
 City State Zip Code  
 LAGRANGE GA 30240-9728  
 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  
 10 / 03 / 2012  
**Transaction ID : SA11.10305**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 OF 167
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

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

Mailing Address 1021 SANDOVAL DRIVE

City State Zip Code  
VIRGINIA BEACH VA 23454-7207

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

Name of Employer Occupation  
CITY OF VIRGINIA BEACH PSYCHOTHERAPIST

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11.10240**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DONALD R. SCIFRES**

Mailing Address 26700 PALO HILLS DRIVE

City State Zip Code  
LOS ALTOS HILLS CA 94022-1927

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 ▼  
9900.00

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11.10258**

Amount of Each Receipt this Period  
9900.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. TOM SIMMS**

Mailing Address 47 LUCKY LEAF CT.

City State Zip Code  
THE WOODLANDS TX 77381-3852

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

Name of Employer Occupation  
FORUM ENERGY TECHNOLOGIES, INC. TREASURER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
10 / 03 / 2012  
**Transaction ID : SA11.10340**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	10500.00
<b>TOTAL</b> 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 167
	<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. MINERVA SIMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1770 FOWLER DRIVE

City	State	Zip Code
MERRITT ISLAND	FL	32952-2729

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

Name of Employer	Occupation
SELF-EMPLOYED	ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2012

**Transaction ID : SA11.10348**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 1752 SEA OATS DRIVE

City	State	Zip Code
ATLANTIC BEACH	FL	32233-5829

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

Name of Employer	Occupation
DUVAL COUNTY PUBLIC SCHOOLS	PUBLIC SCHOOL TEACHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2012

**Transaction ID : SA11.10328**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. CHARLES THOMPSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 6230 E. SHADY GROVE RD

City	State	Zip Code
MEMPHIS	TN	38120-2604

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

Name of Employer	Occupation
TOMSIN STEEL PROCESSING, INC	OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		03		2012

**Transaction ID : SA11.10275**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 167
	<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. STEPHEN TRIGG**  
Full Name (Last, First, Middle Initial)

Mailing Address 4835 APACHE AVE.

City JACKSONVILLE	State FL	Zip Code 32210-7613
----------------------	-------------	------------------------

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

Name of Employer STEPHEN D. TRIGG	Occupation ORTHOPAEDIC SURGEON
--------------------------------------	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
550.00

Date of Receipt  
10 / 03 / 2012  
Transaction ID : SA11.10327

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 109 DE SABLA RD

City HILLSBOROUGH	State CA	Zip Code 94010-6803
----------------------	-------------	------------------------

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

Name of Employer GOLDMAN SACHS	Occupation MANAGING DIRECTOR
-----------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 03 / 2012  
Transaction ID : SA11.10289

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**C. NILS VANOTTERLOO**  
Full Name (Last, First, Middle Initial)

Mailing Address 761 S. LOS ROBLES AVE.

City PASADENA	State CA	Zip Code 91106-3740
------------------	-------------	------------------------

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

Name of Employer SOUNDARTLA	Occupation MUSICIAN
--------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
10 / 03 / 2012  
Transaction ID : SA11.10346

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5300.00
<b>TOTAL</b> 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 167
	<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) <b>A. ANN WUTKE</b>		Date of Receipt 10 / 03 / 2012 <b>Transaction ID : SA11.10243</b>
Mailing Address 6666 ODANA RD, STE 215		Amount of Each Receipt this Period 500.00
City MADISON	State WI	Zip Code 53719-1012
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer SELF-EMPLOYED	Occupation FINANCE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. NORTH SUMTER UTILITY CO, LLC</b>		Date of Receipt 10 / 03 / 2012 <b>Transaction ID : SA11.10316</b>
Mailing Address 1020 LAKE SUMTER LANDING		Amount of Each Receipt this Period 25000.00
City THE VILLAGES	State FL	Zip Code 32162-2699
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 ▼ 25000.00	

Full Name (Last, First, Middle Initial) <b>C. WEAVER HOLDINGS</b>		Date of Receipt 10 / 03 / 2012 <b>Transaction ID : SA11.10315</b>
Mailing Address 14470 BERGEN BOULEVARD SUITE 100		Amount of Each Receipt this Period 500000.00
City NOBLESVILLE	State IN	Zip Code 46060-3377
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 ▼ 2000000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	525500.00
<b>TOTAL</b> 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 167
	<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. RICHARD ALLMON**  
Full Name (Last, First, Middle Initial)

Mailing Address 5112 ALHAMBRA AVE

City LOS ANGELES State CA Zip Code 90032-3409

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

Name of Employer D&S INGREDIENT TRANSFER CO. INC. Occupation EXECUTIVE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 04 / 2012  
**Transaction ID : SA11.10432**

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**B. BOB CANFIELD**  
Full Name (Last, First, Middle Initial)

Mailing Address 7412 VIA RIMINI STREET

City LAS VEGAS State NV Zip Code 89131-0116

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 ▼ 300.00

Date of Receipt 10 / 04 / 2012  
**Transaction ID : SA11.10357**

Amount of Each Receipt this Period 100.00

CONTRIBUTION

**C. PETER CHEUNG**  
Full Name (Last, First, Middle Initial)

Mailing Address 403 WEST MAJESTIC OAK LANE

City GEORGETOWN State TX Zip Code 78633-2067

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

Name of Employer SCOTT & WHITE Occupation PHYSICIAN

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 04 / 2012  
**Transaction ID : SA11.10446**

Amount of Each Receipt this Period 250.00

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 31 OF 167
	<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. KENT CROFT**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7826 CHELSEA ST.  
City TOWSON State MD Zip Code 21204-3641  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CROFT-LEOMINSTER, INC. Occupation INVESTMENT MANAGER  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **3500.00**

Date of Receipt **10 / 04 / 2012**  
**Transaction ID : SA11.10365**  
Amount of Each Receipt this Period **1000.00**  
CONTRIBUTION

**B. NANCY DALOS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 301 BAYVIEW DRIVE  
City BELLEAIR State FL Zip Code 33756-1412  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ST. ANTHONY'S SPECIALISTS Occupation PHYSICIAN  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **500.00**

Date of Receipt **10 / 04 / 2012**  
**Transaction ID : SA11.10352**  
Amount of Each Receipt this Period **500.00**  
CONTRIBUTION

**C. ANTHONY DEUTSCH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 5600 WISCONSIN AVE APT 707  
City CHEVY CHASE State MD Zip Code 20815-4410  
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 **10 / 04 / 2012**  
**Transaction ID : SA11.10405**  
Amount of Each Receipt this Period **250.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **1750.00**  
**TOTAL** This Period (last page this line number only).....

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 167
	<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. DANNY DEVINE**  
Full Name (Last, First, Middle Initial)

Mailing Address 303 OAK HAVEN

City BAYTOWN State TX Zip Code 77520-1267

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 ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012

**Transaction ID : SA11.10410**

Amount of Each Receipt this Period  
 100.00

CONTRIBUTION

**B. ROY DORRANCE**  
Full Name (Last, First, Middle Initial)

Mailing Address 105 SCHENLEY ROAD

City PITTSBURGH State PA Zip Code 15217-1170

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 ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012

**Transaction ID : SA11.10428**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**C. JIM EARLEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 20381 BARENTS SEA CIRCLE

City LAKE FOREST State CA Zip Code 92630-8807

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

Name of Employer PREMIER MAGNETICS INC Occupation OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012

**Transaction ID : SA11.10355**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00

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

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

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

FOR LINE NUMBER: PAGE 33 OF 167  
(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. CHRIS EBER**  
 Mailing Address 22744 SW ULSKY ROAD  
 City WEST LINN State OR Zip Code 97068-9134  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation MORTGAGE BROKER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10387**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MYRA EKREM**  
 Mailing Address 6350 SHADOW RIDGE  
 City BRENTWOOD State TN Zip Code 37027-5646  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RETIRED Occupation RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10421**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DAVID ELKINS**  
 Mailing Address 6023 STEWART ROAD  
 City GALVESTON State TX Zip Code 77551-5419  
 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 ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10384**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 34 OF 167  
(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. GRANT FAUBION**

Mailing Address 1733 NORMAL HILL

City State Zip Code  
EDMOND OK 73034-4992

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

Name of Employer Occupation  
WISIAN LLC CONSULTANT

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10374**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BARRY FEIRSTEIN**

Mailing Address 35 EAST 76TH STREET

City State Zip Code  
NEW YORK NY 10021-1827

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 ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10459**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

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

Mailing Address 4601 LANDIS AVENUE

City State Zip Code  
SEA ISLE CITY NJ 08243-1819

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

Name of Employer Occupation  
J F BUILDERS PRESIDENT/OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10378**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 8000.00

**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 35 OF 167
	<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. TIBOR FREKKO**

Mailing Address 13725 DEAKINS LANE

City GERMANTOWN State MD Zip Code 20874-3303

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

Name of Employer SELF-EMPLOYED 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  
 10 / 04 / 2012

Transaction ID : SA11.10442

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

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

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 ▼  
30000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012

Transaction ID : SA11.10395

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. HOLLY HANOYAN**

Mailing Address 568 WELLESLEY ST

City WESTON State MA Zip Code 02493-1015

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 ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012

Transaction ID : SA11.10373

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11100.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 167
	<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 HOEFFLIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 911 EMERALD BAY

City LAGUNA BEACH State CA Zip Code 92651-1229

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

Name of Employer D&J RACING STABLE, LLC 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  
 10 / 04 / 2012

**Transaction ID : SA11.10415**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**B. DOUGLAS HOEKSEMA**  
Full Name (Last, First, Middle Initial)

Mailing Address 761 PINE TREE ROAD

City WINTER PARK State FL Zip Code 32789-1508

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

Name of Employer DOUGLAS PARTNERS LLC Occupation REAL ESTATE DEVELOPER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 04 / 2012

**Transaction ID : SA11.10396**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C. RALPH E JACKSON JR**  
Full Name (Last, First, Middle Initial)

Mailing Address 6597 NICHOLAS BLVD APT 1704

City NAPLES State FL Zip Code 34108-7272

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  
 10 / 04 / 2012

**Transaction ID : SA11.10383**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3250.00
<b>TOTAL</b> 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 167
	<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. MARC KERALLA**  
Full Name (Last, First, Middle Initial)

Mailing Address 6113 ABERDEEN DR

City PLANO State TX Zip Code 75093-7926

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

Name of Employer BASE4 GROUP INC Occupation PRESIDENT

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  
 10 / 04 / 2012

**Transaction ID : SA11.10362**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B. CHERYL LINDHEIMER**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 2090

City MONROVIA State CA Zip Code 91017-6090

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012

**Transaction ID : SA11.10444**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**C. PEDRO L. LIZAU**  
Full Name (Last, First, Middle Initial)

Mailing Address 11571 BUENA VISTA DR.

City LOS ALTOS HILLS State CA Zip Code 94022-4246

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

Name of Employer PORTOLA MINERALS COMPANY Occupation CEO

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  
 10 / 04 / 2012

**Transaction ID : SA11.10429**

Amount of Each Receipt this Period  
 1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1500.00

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

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

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

FOR LINE NUMBER: PAGE 38 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. MURRAY LUGASH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 130 S LAYTON DR  
 City LOS ANGELES State CA Zip Code 90049-3036  
 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 ▼ 2750.00

Date of Receipt 10 / 04 / 2012  
**Transaction ID : SA11.10455**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**B. MILDRED MCCLURE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5403 CROSSWATER DR.  
 City COLLEGE STATION State TX Zip Code 77845  
 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 10 / 04 / 2012  
**Transaction ID : SA11.10368**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. SEAN OCONNOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address CMR 459  
 City APO State AE Zip Code 09139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer US GOVERNMENT Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 04 / 2012  
**Transaction ID : SA11.10369**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 167
	<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. JENNIFER N. OWENS**  
Full Name (Last, First, Middle Initial)

Mailing Address 967 CASIANO ROAD

City	State	Zip Code
LOS ANGELES	CA	90049-1607

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

Name of Employer	Occupation
CREDIT SUISSE	AVP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2012

**Transaction ID : SA11.10466**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address P.O. BOX 34153

City	State	Zip Code
HOUSTON	TX	77234-4153

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

Name of Employer	Occupation
PERRY HOMES	PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2012

**Transaction ID : SA11.10422**

Amount of Each Receipt this Period  
1000000.00

CONTRIBUTION

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

Mailing Address P.O. BOX 682885

City	State	Zip Code
FRANKLIN	TN	37068-2885

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

Name of Employer	Occupation
GE	BUSINESS DEVELOPMENT EXECUTIVE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2012

**Transaction ID : SA11.10436**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1003000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 40 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)  
**A. ROBERT M. ROSENTHAL**

Mailing Address 11708 CANTON PLACE

City State Zip Code  
STUDIO CITY CA 91604-4165

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 ▼  
50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10423**

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

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

Mailing Address 9227 SW 43RD LANE

City State Zip Code  
GAINESVILLE FL 32608-4170

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

Name of Employer Occupation  
SELF-EMPLOYED 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  
 10 / 04 / 2012  
**Transaction ID : SA11.10464**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 1021 SANDOVAL DRIVE

City State Zip Code  
VIRGINIA BEACH VA 23454-7207

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

Name of Employer Occupation  
CITY OF VIRGINIA BEACH PSYCHOTHERAPIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10356**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25550.00

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

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

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

FOR LINE NUMBER: PAGE 41 OF 167  
(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. DAVID SHOUP**  
 Mailing Address 1214 WOODROW AVE  
 City State Zip Code  
 DUBLIN GA 31021-4144  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SOTERA DEFENSE INTELLIGENCE ANALYST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 04 / 2012  
**Transaction ID : SA11.10364**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ALAN SNOOK**  
 Mailing Address P.O. BOX 66  
 City State Zip Code  
 CARBONDALE CO 81623-0066  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PERFORMANCE, INC CHAIRMAN  
 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  
 10 / 04 / 2012  
**Transaction ID : SA11.10379**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. RICH TEHRANI**  
 Mailing Address 642 WESTOVER RD  
 City State Zip Code  
 STAMFORD CT 06902-1321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 TMC CEO  
 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  
 10 / 04 / 2012  
**Transaction ID : SA11.10385**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 167
	<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. JACOB VOLKERT**  
Full Name (Last, First, Middle Initial)

Mailing Address 26521 AMBER LEAF RD

City TORRANCE	State CA	Zip Code 90505
------------------	-------------	-------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2012

**Transaction ID : SA11.10443**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B. FREDERIC L WILLIAMS**  
Full Name (Last, First, Middle Initial)

Mailing Address 30 FUCHSIA CT.

City COLUMBIA	State SC	Zip Code 29223-5189
------------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	04	/	2012

**Transaction ID : SA11.10406**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**C. HAROLD CROCKER**  
Full Name (Last, First, Middle Initial)

Mailing Address 18411 MARLIN WATERS

City HUMBLE	State TX	Zip Code 77346-8005
----------------	-------------	------------------------

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

Name of Employer RETIRED	Occupation RETIRED
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID : SA11.10533**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 167
	<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. RALPH JAY DAVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 11041 GULF REFLECTIONS

City	State	Zip Code
FORT MYERS	FL	33908-8520

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 ▼  
475.00

Date of Receipt  

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

**Transaction ID : SA11.10496**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

**B. MARY LYNN DURHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 19200 N. PARK BLVD.

City	State	Zip Code
SHAKER HEIGHTS	OH	44122-1817

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

Name of Employer	Occupation
SELF-EMPLOYED	ATTORNEY

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
10		05		2012

**Transaction ID : SA11.10506**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

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

Mailing Address 3002 HILLCREST LANE

City	State	Zip Code
EXPORT	PA	15632-9392

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

Name of Employer	Occupation
CRCSI INC	PHYSICIAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  

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

**Transaction ID : SA11.10530**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5600.00
<b>TOTAL</b> 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 44 OF 167
	<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. GARLAND GRAY**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 82

City WAVERLY State VA Zip Code 23890-0082

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

Name of Employer GRAY LUMBER Occupation SUPERVISOR

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  
 10 / 05 / 2012

**Transaction ID : SA11.10536**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

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

Mailing Address P.O. BOX 1309

City TWISP State WA Zip Code 98856-1309

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 ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : SA11.10482**

Amount of Each Receipt this Period  
 1500.00

CONTRIBUTION

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

Mailing Address 8606 CYPRESS LAKES DRVE

City RALEIGH State NC Zip Code 27615-2116

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 05 / 2012

**Transaction ID : SA11.10474**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6500.00
<b>TOTAL</b> 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 45 OF 167
	<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. MILES LAMSTEIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 10527 PATRINGTON CT.

City LAS VEGAS	State NV	Zip Code 89183-4562
-------------------	-------------	------------------------

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

Name of Employer QLX	Occupation PRESIDENT
-------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

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

**Transaction ID : SA11.10472**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. GLENN LEFKOVITZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 112 GLENWOOD AVE

City WINNETKA	State IL	Zip Code 60093-1509
------------------	-------------	------------------------

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

Name of Employer GLENN MANAGEMENT	Occupation PRESIDENT
--------------------------------------	-------------------------

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
10	/	05	/	2012

**Transaction ID : SA11.10484**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C. ANTHONY MARKEL**  
Full Name (Last, First, Middle Initial)

Mailing Address 568 ICE POND CV

City MANAKIN SABOT	State VA	Zip Code 23103-3161
-----------------------	-------------	------------------------

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

Name of Employer MARKEL CORPORATION	Occupation INSURANCE EXECUTIVE
--	-----------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

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

**Transaction ID : SA11.10504**

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	26250.00
<b>TOTAL</b> 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 46 OF 167
	<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 ALAN MCNEILL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2035 N MAJOR DR  
 City BEAUMONT State TX Zip Code 77713-9277  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 05 / 2012  
**Transaction ID : SA11.10503**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**B. CHRISTINE PRINCE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1004 N PARKVIEW ST  
 City EFFINGHAM State IL Zip Code 62401-3152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CARLE HOSPITAL Occupation R.N.  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 05 / 2012  
**Transaction ID : SA11.10523**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. WILLIAM HENRY ROJ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 19200 N PARK BLVD.  
 City SHAKER HEIGHTS State OH Zip Code 44122-1817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation BUSINESSMAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 05 / 2012  
**Transaction ID : SA11.10502**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	6250.00
<b>TOTAL</b> 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 47 OF 167
	<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. 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 **30000.00**

Date of Receipt **10 / 05 / 2012**  
**Transaction ID : SA11.10494**  
 Amount of Each Receipt this Period **5000.00**  
 CONTRIBUTION

**B. SUZANNE STOVALL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 134 S. VERANDA RIDGE DR.  
 City THE WOODLANDS State TX Zip Code 77382-1717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PINWOOD MEDICAL CLINIC, PA Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 05 / 2012**  
**Transaction ID : SA11.10539**  
 Amount of Each Receipt this Period **250.00**  
 CONTRIBUTION

**C. ASTRID WEISMANN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 55 OLD HILL RD  
 City WESTPORT State CT Zip Code 06880-2310  
 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 **2000.00**

Date of Receipt **10 / 05 / 2012**  
**Transaction ID : SA11.10491**  
 Amount of Each Receipt this Period **2000.00**  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>7250.00</b>
<b>TOTAL</b> 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 48 OF 167
	<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. AMIR WOLFE**

Mailing Address **8145 BALSON AVE**

City **UNIVERSITY CITY** State **MO** Zip Code **63130-3640**

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

Name of Employer **MONSANTO COMPANY** Occupation **PHYSICIAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 /  /   
**10 / 05 / 2012**

**Transaction ID : SA11.10497**

Amount of Each Receipt this Period  
 **250.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MERS, INC.**

Mailing Address **P.O. BOX 73525**

City **HOUSTON** State **TX** Zip Code **77273-3525**

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 ▼ **25000.00**

Date of Receipt  
 /  /   
**10 / 05 / 2012**

**Transaction ID : SA11.10511**

Amount of Each Receipt this Period  
 **10000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. SCD INVESTMENTS, LLC**

Mailing Address **1020 LAKE SUMTER LANDING**

City **THE VILLAGES** State **FL** Zip Code **32162-2699**

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 ▼ **25000.00**

Date of Receipt  
 /  /   
**10 / 05 / 2012**

**Transaction ID : SA11.10512**

Amount of Each Receipt this Period  
 **25000.00**

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text"/> <b>35250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 49 OF 167  
(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. KURT AVERY**  
 Mailing Address 4046 BIDGEPORT DRIVE  
 City State Zip Code  
 SAFETY HARBOR FL 34695-4913  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SAWYER PRODUCTS BUSINESS MANAGER  
 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  
 10 / 06 / 2012  
**Transaction ID : SA11.10564**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JOHN DOWD**  
 Mailing Address 1529 CROWELL ROAD  
 City State Zip Code  
 VIENNA VA 22182-1514  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AKIN, GUMP, STRAUSS, HAER & FELD, LLP ATTORNEY  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 15000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2012  
**Transaction ID : SA11.10545**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. VIRGINIA EWING**  
 Mailing Address 1508 KIRBY DRIVE  
 City State Zip Code  
 HOUSTON TX 77019-3302  
 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 ▼  
 5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2012  
**Transaction ID : SA11.10563**  
 Amount of Each Receipt this Period  
 5000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ► 8500.00  
**TOTAL** This Period (last page this line number only)..... ►

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

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

FOR LINE NUMBER: PAGE 50 OF 167  
(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. ANN HALE**

Mailing Address 4066 HIDDEN VALLEY RD.

City OROVILLE      State CA      Zip Code 95965-9148

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 ▼  
400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2012  
**Transaction ID : SA11.10542**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. STEPHAN NEWHOUSE**

Mailing Address 600 COCONUT PALM ROAD

City VERO BEACH      State FL      Zip Code 32963-3713

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 ▼  
2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2012  
**Transaction ID : SA11.10544**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. LUCIA UIHLEIN**

Mailing Address 715 LANDS END DR

City LONGBOAT KEY      State FL      Zip Code 34228-1055

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  
 M M / D D / Y Y Y Y Y Y  
 10 / 06 / 2012  
**Transaction ID : SA11.10567**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1350.00

**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 52 OF 167
	<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. LOIS ANN ERASMY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 TERRA LINDA COURT  
 City MILLBRAE State CA Zip Code 94030-2915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PROPERTY MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 07 / 2012  
**Transaction ID : SA11.10629**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**B. DAVID ERIKSSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O.Box 2053  
 City MINDEN State NV Zip Code 89423-2053  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. FOREST SERVICE Occupation WILDLAND FIREFIGHTER HOTSHOT CREW  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 07 / 2012  
**Transaction ID : SA11.10621**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. C BRUCE GAMABARDELLA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 199 MCNAMARA RD  
 City SPRING VALLEY State NY Zip Code 10977-1202  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PROFESSIONAL ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 07 / 2012  
**Transaction ID : SA11.10612**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1250.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 53 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. DONALD HAWKS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 80 DANVERS LANE  
 City NEW CANAAN State CT Zip Code 06840-6801  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer BROOKSIDE EQUITY PARTNERS Occupation BUSINESS OWNER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 07 / 2012  
**Transaction ID : SA11.10632**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**B. STEVEN LEVINE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26800 DEGAS LN  
 City VALENCIA State CA Zip Code 91355-1833  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 07 / 2012  
**Transaction ID : SA11.10619**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**C. DOUG ORR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6628 CARSTON CT  
 City NORTH RICHLAND HILLS State TX Zip Code 76180-7843  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer FIRST CASH FINANCIAL SERVICES Occupation CFO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 07 / 2012  
**Transaction ID : SA11.10601**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

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

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

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

FOR LINE NUMBER: PAGE 54 OF 167  
(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. JAMES WHITE**  
 Mailing Address 2576 FALLEN LEAF LANE  
 City State Zip Code  
 CHARLOTTEVILLE VA 22901-5224  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 VIRGINIA PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1750.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 07 / 2012  
**Transaction ID : SA11.10626**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. KATHERINE BRITTIN**  
 Mailing Address 160 MAPLE DRIVE  
 City State Zip Code  
 LOS ALAMOS NM 87544-1571  
 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  
 10 / 08 / 2012  
**Transaction ID : SA11.10647**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BOB CANFIELD**  
 Mailing Address 7412 VIA RIMINI STREET  
 City State Zip Code  
 LAS VEGAS NV 89131-0116  
 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  
 10 / 08 / 2012  
**Transaction ID : SA11.10666**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00  
**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 55 OF 167
	<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 DOSHER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10110 DEL MONTE  
City HOUSTON State TX Zip Code 77042-2434  
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 **1400.00**

Date of Receipt **10 / 08 / 2012**  
**Transaction ID : SA11.10646**  
Amount of Each Receipt this Period **350.00**  
CONTRIBUTION

**B. WILLIAM GOODING**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3702 MAPLECREST ST.  
City TEXARKANA State TX Zip Code 75503-1419  
FEC ID number of contributing federal political committee. **C**  
Name of Employer WILLIAM C. GOODING, P.C. Occupation ATTORNEY  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **750.00**

Date of Receipt **10 / 08 / 2012**  
**Transaction ID : SA11.10644**  
Amount of Each Receipt this Period **500.00**  
CONTRIBUTION

**C. TIM HAGLE**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3105 FRIENDSHIP STREET  
City IOWA CITY State IA Zip Code 52245-5115  
FEC ID number of contributing federal political committee. **C**  
Name of Employer THE UNIVERSITY OF IOWA Occupation PROFESSOR  
Receipt For:  Primary  General  Other (specify)   
Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 08 / 2012**  
**Transaction ID : SA11.10651**  
Amount of Each Receipt this Period **250.00**  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1100.00</b>
<b>TOTAL</b> 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 56 OF 167
	<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. ROBERT HIDAY**

Mailing Address 3600 JULINGTON CREEK ROAD

City JACKSONVILLE	State FL	Zip Code 32223-3713
----------------------	-------------	------------------------

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

Name of Employer DODGE ENTERPRISES, INC.	Occupation CEO
---	-------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
3500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		08		2012

**Transaction ID : SA11.10639**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

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

Mailing Address 10314 SW 23RD COURT

City DAVIE	State FL	Zip Code 33324-7623
---------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation PHYSICIAN
-----------------------------------	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
12500.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		08		2012

**Transaction ID : SA11.10679**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ANA KALES**

Mailing Address 40 AVONDALE ROAD

City NEWTON	State MA	Zip Code 02459-1619
----------------	-------------	------------------------

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  

M M	/	D D	/	Y Y Y Y
10		08		2012

**Transaction ID : SA11.10678**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5250.00
<b>TOTAL</b> 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 57 OF 167
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. HENRY KANE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 729

City BARTLESVILLE	State OK	Zip Code 74005-0729
----------------------	-------------	------------------------

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 ▼  
2500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2012

**Transaction ID : SA11.10664**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. ALAN MAHLER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 316 HIGHLAND BLVD.

City BREMEN	State OH	Zip Code 43107-1021
----------------	-------------	------------------------

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

Name of Employer MCAULEY MFG. INC.	Occupation PRESIDENT
---------------------------------------	-------------------------

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
10		08		2012

**Transaction ID : SA11.10642**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**C. WILEY MOSSY**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1000 UPTOWN PARK BOULEVARD

City HOUSTON	State TX	Zip Code 77056-3251
-----------------	-------------	------------------------

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

Name of Employer MOSSY NISSAN	Occupation AUTOMOBILE DEALER
----------------------------------	---------------------------------

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
10		08		2012

**Transaction ID : SA11.10648**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6250.00
<b>TOTAL</b> 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 58 OF 167
	<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. KATHARINE RUSSELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 368 CYPRESS POINT DR.

City	State	Zip Code
PALM DESERT	CA	92211-1713

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

Name of Employer	Occupation
RWWRA PUBLISHING	AUTHOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2012

**Transaction ID : SA11.10653**

Amount of Each Receipt this Period  

500.00
--------

**CONTRIBUTION**

**B. THOMAS M. SIEBEL LIVING TRUST**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 240

City	State	Zip Code
PALO ALTO	CA	94302-0240

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

Name of Employer	Occupation
C3, LLC	CHAIRMAN AND CEO

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500000.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2012

**Transaction ID : SA11.10659**

Amount of Each Receipt this Period  

500000.00
-----------

**CONTRIBUTION**

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

Mailing Address 1603 ORRINGTON AVE

City	State	Zip Code
EVANSTON	IL	60201-3841

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

Name of Employer	Occupation
XMS CAPITAL PARTNERS	INVESTMENT BANKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		08		2012

**Transaction ID : SA11.10663**

Amount of Each Receipt this Period  

500.00
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**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>500550.00</b>
<b>TOTAL</b> 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 59 OF 167
	<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. JAKE TAYLOR**  
Full Name (Last, First, Middle Initial)

Mailing Address 327 HEDWIG

City HOUSTON State TX Zip Code 77024-6711

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 / D D / Y Y Y Y Y Y  
 10 / 08 / 2012

**Transaction ID : SA11.10640**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

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

Mailing Address P.O. BOX 24997

City GREENVILLE State SC Zip Code 29616-2497

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

Name of Employer SUPER DUPER INC Occupation EDUCATIONAL PUBLISHER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2012

**Transaction ID : SA11.10650**

Amount of Each Receipt this Period  
 2000.00

CONTRIBUTION

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

Mailing Address 9121 DAVID FORT ROAD

City ARGYLE State TX Zip Code 76226-2954

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 ▼ 25000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : SA11.10726**

Amount of Each Receipt this Period  
 25000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	32000.00
<b>TOTAL</b> 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 60 OF 167
	<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. DONALD A. BENDIX**  
Full Name (Last, First, Middle Initial)  
Mailing Address 9936 MELVIN AVE.  
City NORTHRIDGE State CA Zip Code 91324-1018  
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 **10 / 09 / 2012**  
**Transaction ID : SA11.10733**  
Amount of Each Receipt this Period **5000.00**  
CONTRIBUTION

**B. TIM BERG**  
Full Name (Last, First, Middle Initial)  
Mailing Address 10416 SE 22ND ST  
City BELLEVUE State WA Zip Code 98004-7252  
FEC ID number of contributing federal political committee. **C**  
Name of Employer UBS FINANCIAL SERVICES INC Occupation FINANCIAL ADVISOR  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **10 / 09 / 2012**  
**Transaction ID : SA11.10704**  
Amount of Each Receipt this Period **1000.00**  
CONTRIBUTION

**C. ALBERT E. CARPENTER JR.**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1432 EIGHTH STREET  
City NEW ORLEANS State LA Zip Code 70115-3337  
FEC ID number of contributing federal political committee. **C**  
Name of Employer MORGAN STANLEY Occupation FINANCIAL ADVISOR  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt **10 / 09 / 2012**  
**Transaction ID : SA11.10718**  
Amount of Each Receipt this Period **250.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **6250.00**  
**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 61 OF 167
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. 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 ▼ 1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : SA11.10720**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**B. HENRY FAISON**  
Full Name (Last, First, Middle Initial)

Mailing Address 121 W. TRADE STREET  
27TH FLOOR

City CHARLOTTE State NC Zip Code 28202-5399

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

Name of Employer FAISON & ASSOCIATES Occupation CHAIRMAN AND FOUNDER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2012

**Transaction ID : SA11.10687**

Amount of Each Receipt this Period  
 250000.00

CONTRIBUTION

**C. JULIUS I. FOX**  
Full Name (Last, First, Middle Initial)

Mailing Address 5450 WHITLEY PARK TERRACE  
APT. 801

City BETHESDA State MD Zip Code 20814-2061

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

Name of Employer FULL COURT PRESS, LLC 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  
 10 / 09 / 2012

**Transaction ID : SA11.10731**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 255500.00

**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 62 OF 167  
(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. J S GILBERTSON**

Mailing Address 1 AVX BLVD

City State Zip Code  
FOUNTAIN INN SC 29644-9039

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

Name of Employer Occupation  
AVX MANAGER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 09 / 2012  
**Transaction ID : SA11.10688**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

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

Mailing Address 2740 ORO BLANCO DR

City State Zip Code  
COLORADO SPRINGS CO 80917-3728

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 09 / 2012  
**Transaction ID : SA11.10696**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. STEVEN HELM**

Mailing Address 2635 YORKTOWN DR.

City State Zip Code  
TUSCALOOSA AL 35406-1675

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

Name of Employer Occupation  
ALLERGY, ASTHMA & SINUS CENTER PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 09 / 2012  
**Transaction ID : SA11.10770**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 3250.00

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

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

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

FOR LINE NUMBER: PAGE 63 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. PETER JAMESON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 TRAVIS  
 City HOUSTON State TX Zip Code 77002-3009  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ANDREWS & KURTH, LLP Occupation SENIOR ATTORNEY  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 10 / 09 / 2012  
**Transaction ID : SA11.10716**  
 Amount of Each Receipt this Period 2500.00  
 CONTRIBUTION

**B. JAMES P. KOEHLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 15  
 City ABERDEEN State SD Zip Code 57402-0015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation HOTEL DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 09 / 2012  
**Transaction ID : SA11.10724**  
 Amount of Each Receipt this Period 25000.00  
 CONTRIBUTION

**C. TERRY LONGE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2335 HOLLYBUSH RD  
 City MEDINA State MN Zip Code 55340-9470  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ALLINA Occupation PHYSICIAN  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 10 / 09 / 2012  
**Transaction ID : SA11.10776**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 28500.00  
**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 64 OF 167  
(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. ROBYN B. LOUGHRAN**

Mailing Address 15584 BILLINGTON CT.

City State Zip Code  
GRANGER IN 46530-8928

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

Name of Employer Occupation  
HOMEMAKER HOMEMAKER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2012  
**Transaction ID : SA11.10732**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. MARY MAHAN**

Mailing Address 3659 POST OAK TRITT ROAD

City State Zip Code  
MARIETTA GA 30062-5109

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  
 10 / 09 / 2012  
**Transaction ID : SA11.10751**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BRAD MCDONALD**

Mailing Address PO BOX 2176

City State Zip Code  
ROCKPORT TX 78381-2176

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

Name of Employer Occupation  
CORNERSTONE CARE HOLDINGS, LLC PRINCIPAL

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2012  
**Transaction ID : SA11.10723**

Amount of Each Receipt this Period  
800.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6800.00

**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 65 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. RUBEN A. MENDIOLA JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 566300  
 City MIAMI State FL Zip Code 33256-6300  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DEALERNFA, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2012  
**Transaction ID : SA11.10729**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**B. RICHARD MILLER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 33045 WATERVIEW DR W  
 City LOXLEY State AL Zip Code 36551-2561  
 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 10 / 09 / 2012  
**Transaction ID : SA11.10782**  
 Amount of Each Receipt this Period 5000.00  
 CONTRIBUTION

**C. MARTIN MOREHART**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 231  
 City SANTA PAULA State CA Zip Code 93061-0231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation RANCHER/ FARMER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 09 / 2012  
**Transaction ID : SA11.10753**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6250.00  
**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 66 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. THOMAS NICKELE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 759 N ELMORE  
 City State Zip Code  
 PARK RIDGE IL 60068-2712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MADDEN COMMUNICATIONS EXEC VP/CFO  
 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  
 10 / 09 / 2012  
**Transaction ID : SA11.10749**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. RUSSELL PROCTOR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 222 66TH ST  
 City State Zip Code  
 VIRGINIA BEACH VA 23451-2041  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED CONSULTANT  
 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  
 10 / 09 / 2012  
**Transaction ID : SA11.10685**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C. JOE RANALLETTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7214 S. XANTHIA STREET  
 City State Zip Code  
 CENTENNIAL CO 80112-1921  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 BAXTER HEALTHCARE ENGINEER  
 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  
 10 / 09 / 2012  
**Transaction ID : SA11.10779**  
 Amount of Each Receipt this Period  
 500.00  
 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 67 OF 167  
(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. ROGER RUSCH**  
 Mailing Address 1521 VIA FERNANDEZ  
 City State Zip Code  
 PALOS VERDES ESTATES CA 90274-1944  
 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  
 10 / 09 / 2012  
**Transaction ID : SA11.10701**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. NICHOLAS SCHINDLER**  
 Mailing Address 7164 BARD ROAD  
 City State Zip Code  
 TIPP CITY OH 45371-7623  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CREATIVE IMAGES INST OF COSMETOLOGY PRESIDENT  
 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  
 10 / 09 / 2012  
**Transaction ID : SA11.10691**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ROBERT SEGERSTROM**  
 Mailing Address 236 COUNTRY CLUB DR.  
 City State Zip Code  
 STERLING CO 80751-8654  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED CLINICAL PSYCHOLOGIST  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2012  
**Transaction ID : SA11.10774**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 167
	<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**

Full Name (Last, First, Middle Initial)  
**A. RICHARD L. SHARP**

Mailing Address P.O. BOX 42333

City RICHMOND State VA Zip Code 23242-2333

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

Name of Employer V-TEN CAPITAL PARTNERS Occupation MANAGING DIRECTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
100000.00

Date of Receipt  
10 / 09 / 2012  
**Transaction ID : SA11.10712**

Amount of Each Receipt this Period  
100000.00

CONTRIBUTION

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

Mailing Address 4480 MINT WAY

City DALLAS State TX Zip Code 75236-2012

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

Name of Employer WHEELS AMERICA Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
10 / 09 / 2012  
**Transaction ID : SA11.10738**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ROBERT B. TRUSSELL**

Mailing Address 167 W. MAIN STREET SUITE 1500

City LEXINGTON State KY Zip Code 40507-1712

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  
10 / 09 / 2012  
**Transaction ID : SA11.10725**

Amount of Each Receipt this Period  
50000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 150500.00

**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 69 OF 167
	<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. JOSEPH M. WALLER**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 150689

City FORT WORTH State TX Zip Code 76108-0689

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 ▼ 550.00

Date of Receipt 10 / 09 / 2012  
Transaction ID : SA11.10717

Amount of Each Receipt this Period 100.00

CONTRIBUTION

**B. TOM WEBER**  
Full Name (Last, First, Middle Initial)

Mailing Address 16869 SW 65TH AVE., NO.260

City LAKE OSWEGO State OR Zip Code 97035-7865

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 10 / 09 / 2012  
Transaction ID : SA11.10761

Amount of Each Receipt this Period 100.00

CONTRIBUTION

**C. SHIRLEY WHITNEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 12 ASHMAN DRIVE

City CHELSEA State ME Zip Code 04330-1082

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

Name of Employer MAINE INSTRUMENT FLIGHT Occupation BUSINESS OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 09 / 2012  
Transaction ID : SA11.10699

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1200.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 167
	<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. HENRY ZAYAS**

Mailing Address 1449 SE RIVERSIDE DR

City STUART	State FL	Zip Code 34996-1207
----------------	-------------	------------------------

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  
10 / 09 / 2012  
**Transaction ID : SA11.10768**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. C&E ENTERPRISES, LLC**

Mailing Address P.O. BOX 1527

City GREENVILLE	State NC	Zip Code 27835-1527
--------------------	-------------	------------------------

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 ▼  
25000.00

Date of Receipt  
10 / 09 / 2012  
**Transaction ID : SA11.10737**

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. EAST BAY FIXTURE COMPANY**

Mailing Address PO BOX 370

City DARBY	State MT	Zip Code 59829-0370
---------------	-------------	------------------------

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 ▼  
2000.00

Date of Receipt  
10 / 09 / 2012  
**Transaction ID : SA11.10735**

Amount of Each Receipt this Period  
2000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	27250.00
<b>TOTAL</b> 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 71 OF 167
	<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. PAPA DOUG TRUST**

Mailing Address 5300 GRAND DEL MAR CT

City SAN DIEGO	State CA	Zip Code 92130-4901
-------------------	-------------	------------------------

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 ▼  
130000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

**Transaction ID : SA11.10705**

Amount of Each Receipt this Period  
130000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. SHOPPING CENTER DEVELOPMENT**

Mailing Address 1020 LAKE SUMTER LANDING

City THE VILLAGES	State FL	Zip Code 32162-2699
----------------------	-------------	------------------------

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 ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		09		2012

**Transaction ID : SA11.10736**

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. TAMARA ARENDT**

Mailing Address 2603 NORTH LAKE DRIVE

City MILWAUKEE	State WI	Zip Code 53211-3838
-------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation CONTRACTOR / CONSULTANT
-----------------------------------	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

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

**Transaction ID : SA11.10835**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	155500.00
<b>TOTAL</b> 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 72 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. JOHN BARINEAU**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5509 BRIAR DRIVE  
 City HOUSTON State TX Zip Code 77056-1107  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer RADNEY MANAGEMENT & INVESTMENTS Occupation CHAIRMAN & CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 10 / 2012  
**Transaction ID : SA11.10795**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**B. JIM EVANS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 27409  
 City OMAHA State NE Zip Code 68127-0409  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CLEAN COUNTRY Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 10 / 2012  
**Transaction ID : SA11.10798**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**C. DOUGLAS HOEKSEMA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 761 PINE TREE ROAD  
 City WINTER PARK State FL Zip Code 32789-1508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DOUGLAS PARTNERS LLC Occupation REAL ESTATE DEVELOPER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt 10 / 10 / 2012  
**Transaction ID : SA11.10808**  
 Amount of Each Receipt this Period 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 1750.00  
**TOTAL** This Period (last page this line number only).....▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 167
	<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. VICTORIA KANE**  
Full Name (Last, First, Middle Initial)

Mailing Address 350 STUYVESANT AVE

City RYE State NY Zip Code 10580-3150

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 ▼ 2500.00

Date of Receipt 10 / 10 / 2012  
**Transaction ID : SA11.10829**

Amount of Each Receipt this Period 2500.00

CONTRIBUTION

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

Mailing Address 1701 CHEROKEE BLVD

City KNOXVILLE State TN Zip Code 37919-8335

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 10 / 10 / 2012  
**Transaction ID : SA11.10794**

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**C. T. BOONE PICKENS**  
Full Name (Last, First, Middle Initial)

Mailing Address 8117 PRESTON ROAD SUITE 260

City DALLAS State TX Zip Code 75225-6321

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

Name of Employer BP CAPITAL Occupation CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000000.00

Date of Receipt 10 / 10 / 2012  
**Transaction ID : SA11.10816**

Amount of Each Receipt this Period 1000000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1003500.00

**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 74 OF 167
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)  
**A. GARY R. PRICE**

Mailing Address 11339 AVANT LANE

City State Zip Code  
CINCINNATI OH 45249-2373

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

Name of Employer Occupation  
FUND EVALUATION GROUP MANAGING PRINCIPAL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
10 / 10 / 2012  
**Transaction ID : SA11.10817**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

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

Mailing Address 1801 BAYBERRY CT.

City State Zip Code  
RICHMOND VA 23226-3771

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

Name of Employer Occupation  
PRUITT COMPANIES OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
10 / 10 / 2012  
**Transaction ID : SA11.10810**

Amount of Each Receipt this Period  
15000.00

CONTRIBUTION

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

Mailing Address 600 EAST LAS COLINAS BOULEVARD  
SUITE 1900

City State Zip Code  
IRVING TX 75039-5601

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

Name of Employer Occupation  
TRT HOLDINGS INC. CHAIRMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500000.00

Date of Receipt  
10 / 10 / 2012  
**Transaction ID : SA11.10806**

Amount of Each Receipt this Period  
500000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 517500.00

**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 75 OF 167
	<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. PHILLIP SCHMIDT**

Mailing Address 12700 EAST BRONCOS PARKWAY

City ENGLEWOOD	State CO	Zip Code 80112-4559
-------------------	-------------	------------------------

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

Name of Employer BIGHORN PLASTERING INC.	Occupation PRESIDENT
---	-------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2012  
**Transaction ID : SA11.10812**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. LEWIS TEICH**

Mailing Address 1573 RED MESA LN.

City BELLVUE	State CO	Zip Code 80512-5865
-----------------	-------------	------------------------

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 / D D / Y Y Y Y Y Y  
 10 / 10 / 2012  
**Transaction ID : SA11.10787**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 472 S STREET RT 123

City LEBANON	State OH	Zip Code 45036-9756
-----------------	-------------	------------------------

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

Name of Employer GREENSITE	Occupation SALES
-------------------------------	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2012  
**Transaction ID : SA11.10799**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1000.00
<b>TOTAL</b> 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 76 OF 167
	<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) <b>A. BOLLINGER SHIPYARDS</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2012
Mailing Address P.O. BOX 250		<b>Transaction ID : SA11.10820</b>
City LOCKPORT	State LA	Zip Code 70374-0250
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25000.00	
Name of Employer N/A	Occupation N/A	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name (Last, First, Middle Initial) <b>B. LB INDUSTRIES, INC.</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2012
Mailing Address 8770 RAILROAD DR. LATONIA STATION		<b>Transaction ID : SA11.10797</b>
City CONVINGTON	State KY	Zip Code 41015-9096
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 50000.00	
Name of Employer N/A	Occupation N/A	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 50000.00	

Full Name (Last, First, Middle Initial) <b>C. STEPHENS INVESTMENTS HOLDINGS L.L.C</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 10 / 2012
Mailing Address 111 CENTER ST.		<b>Transaction ID : SA11.10811</b>
City LITTLE ROCK	State AR	Zip Code 72201-4402
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250000.00	
Name of Employer N/A	Occupation N/A	CONTRIBUTION
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1250000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	325000.00
<b>TOTAL</b> 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 77 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. SUMTER SANITATION, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1020 LAKE SUMTER LANDING  
 City THE VILLAGES State FL Zip Code 32162-2699  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A N/A  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 75000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2012  
**Transaction ID : SA11.10819**  
 Amount of Each Receipt this Period  
 75000.00  
 CONTRIBUTION

**B. TRT HOLDINGS, INC.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 600 LAS COLINAS BLVD. E  
 STE. 1900  
 City IRVING State TX Zip Code 75039-5626  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A N/A  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 10 / 2012  
**Transaction ID : SA11.10807**  
 Amount of Each Receipt this Period  
 500000.00  
 CONTRIBUTION

**C. SCOTT ARTHUR**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 7112 GLACIER RIDGE BLVD.  
 City DUBLIN State OH Zip Code 43017-7035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 IGS ENERGY SALES  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 11 / 2012  
**Transaction ID : SA11.10860**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 575250.00  
**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 78 OF 167
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

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

Mailing Address 2020 TERRAZA PL

City	State	Zip Code
FULLERTON	CA	92835-3308

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 ▼  
1500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2012

**Transaction ID : SA11.10838**

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

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

Mailing Address 563 COW CK. LN.

City	State	Zip Code
CORVALLIS	MT	59828-9422

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2012

**Transaction ID : SA11.10856**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**C. HUGH A. FITZSIMONS, JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 130353

City	State	Zip Code
HOUSTON	TX	77219-0353

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 ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2012

**Transaction ID : SA11.10887**

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11750.00
<b>TOTAL</b> 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 79 OF 167
	<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 FOGARTY**  
Full Name (Last, First, Middle Initial)

Mailing Address 23 SIVER STREET

City SIDNEY State NY Zip Code 13838-1624

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  
 10 / 11 / 2012

**Transaction ID : SA11.10871**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B. NEAL GARONZIK**  
Full Name (Last, First, Middle Initial)

Mailing Address 812 PARK AVENUE

City NEW YORK State NY Zip Code 10021-2759

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  
 10 / 11 / 2012

**Transaction ID : SA11.10876**

Amount of Each Receipt this Period  
 50000.00

CONTRIBUTION

**C. BRENT L. GEPHART SR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 24 DOCKSIDE LANE #87

City KEY LARGO State FL Zip Code 33037-5267

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 11 / 2012

**Transaction ID : SA11.10880**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50750.00
<b>TOTAL</b> 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 80 OF 167
	<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. SARAH J. GEPHART**

Mailing Address **24 DOCKSIDE LANE #87**

City **KEY LARGO** State **FL** Zip Code **33037-5267**

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  
 /  /   
**10 / 11 / 2012**

**Transaction ID : SA11.10879**

Amount of Each Receipt this Period  
 **10000.00**

CONTRIBUTION

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

Mailing Address **10739 GUN LAKE ROAD**

City **MIDDLEVILLE** State **MI** Zip Code **49333-8788**

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

Name of Employer **SELF-EMPLOYED** Occupation **FINANCIAL PLANNING**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 /  /   
**10 / 11 / 2012**

**Transaction ID : SA11.10858**

Amount of Each Receipt this Period  
 **500.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. GARY B. GREER**

Mailing Address **2329-A NE 123RD STREET**

City **SEATTLE** State **WA** Zip Code **98125-5242**

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

Name of Employer **LAB CORP OF AMERICA** Occupation **MED TECH**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 /  /   
**10 / 11 / 2012**

**Transaction ID : SA11.10872**

Amount of Each Receipt this Period  
 **100.00**

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>10600.00</b>
<b>TOTAL</b> 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 81 OF 167  
(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. JOEY HARRIS**

Mailing Address **7777 MELROSE AVENUE**

City State Zip Code  
**LOS ANGELES CA 90046-7328**

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

Name of Employer Occupation  
**SELF-EMPLOYED BICYCLE SALES, REPAIR, & RENTALS**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**250.00**

Date of Receipt  
**10 / 11 / 2012**

**Transaction ID : SA11.10867**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. BETSY HOLDEN**

Mailing Address **325 WOODLEY ROAD**

City State Zip Code  
**WINNETKA IL 60093-3740**

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

Name of Employer Occupation  
**SELF-EMPLOYED CONSULTANT**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**2500.00**

Date of Receipt  
**10 / 11 / 2012**

**Transaction ID : SA11.10844**

Amount of Each Receipt this Period  
**2500.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. BARRY JAMES**

Mailing Address **2848 LOWER BELLBROOK RD**

City State Zip Code  
**SPRING VALLEY OH 45370-8766**

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

Name of Employer Occupation  
**JIR RIA**

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**1000.00**

Date of Receipt  
**10 / 11 / 2012**

**Transaction ID : SA11.10843**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **3750.00**

**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 82 OF 167
	<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 LEWE**  
Full Name (Last, First, Middle Initial)

Mailing Address 8937 ELLIOTTS COURT

City ORLANDO State FL Zip Code 32836-5030

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

Name of Employer ASPIRE TECHNOLOGIES, INC. Occupation SOFTWARE DEVELOPER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 11 / 2012  
**Transaction ID : SA11.10845**

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**B. STAMAN OGILVIE**  
Full Name (Last, First, Middle Initial)

Mailing Address 648 ROCKY RIVER RD

City HOUSTON State TX Zip Code 77056-1631

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

Name of Employer HINES Occupation DEVELOPMENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 15000.00

Date of Receipt 10 / 11 / 2012  
**Transaction ID : SA11.10864**

Amount of Each Receipt this Period 15000.00

CONTRIBUTION

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

Mailing Address P.O. BOX 787

City FRIANT State CA Zip Code 93626-0787

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

Name of Employer DON PICKETT & ASSOCIATES, INC. Occupation GENERAL CONTRACTOR

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 11 / 2012  
**Transaction ID : SA11.10883**

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 16250.00

**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 84 OF 167
	<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. DAVID VAN HORNE**  
Full Name (Last, First, Middle Initial)

Mailing Address 525 PICACHO LANE

City SANTA BARBARA State CA Zip Code 93108-1222

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

Name of Employer PRICE, POSTEL & PARMA LLP Occupation ATTORNEY

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 11 / 2012  
**Transaction ID : SA11.10837**

Amount of Each Receipt this Period 250.00

CONTRIBUTION

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

Mailing Address 20320 SW BIRCH ST STE 150

City NEWPORT BEACH State CA Zip Code 92660-1790

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

Name of Employer HUNT PACIFIC Occupation REAL ESTATE

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 10 / 11 / 2012  
**Transaction ID : SA11.10885**

Amount of Each Receipt this Period 1000.00

CONTRIBUTION

**C. ROBERT GOYNE TRUST**  
Full Name (Last, First, Middle Initial)

Mailing Address 116 BROOK VALLEY ROAD

City WILMINGTON State DE Zip Code 19807-2004

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 ▼ 20000.00

Date of Receipt 10 / 11 / 2012  
**Transaction ID : SA11.10875**

Amount of Each Receipt this Period 10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 11250.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 167
	<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. LEWIS BETTMAN III**  
Full Name (Last, First, Middle Initial)

Mailing Address 525 OAK VALLEY

City ST. LOUIS State MO Zip Code 63131-4731

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

Name of Employer RAYMOND JAMES Occupation BROKER & ANALYST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : SA11.10939**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B. DOUGLAS BEVIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 530 HILLSIDE DRIVE EAST

City SEATTLE State WA Zip Code 98112-5054

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 ▼ 5000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2012

**Transaction ID : SA11.10932**

Amount of Each Receipt this Period  
 5000.00

CONTRIBUTION

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

Mailing Address 1200 E. 21ST PLACE

City TULSA State OK Zip Code 74114-1216

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

Name of Employer WPX ENERGY, INC. 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  
 10 / 12 / 2012

**Transaction ID : SA11.10920**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5750.00
<b>TOTAL</b> 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 86 OF 167
	<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. LAURANCE G BRODERICK**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4661 MONACO STREET  
 City DENVER State CO Zip Code 80216-3304  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ACME MANUFACTURING COMPANY, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **15000.00**

Date of Receipt **10 / 12 / 2012**  
**Transaction ID : SA11.10914**  
 Amount of Each Receipt this Period **15000.00**  
 CONTRIBUTION

**B. RICHARD BROWN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 106 WOOD TRAIL  
 City WEST LAKE HILLS State TX Zip Code 78746-5241  
 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 **10 / 12 / 2012**  
**Transaction ID : SA11.10927**  
 Amount of Each Receipt this Period **1000.00**  
 CONTRIBUTION

**C. DON CAMPAGNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16106 GULF BLVD  
 City REDINGTON BEACH State FL Zip Code 33708-1628  
 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 **700.00**

Date of Receipt **10 / 12 / 2012**  
**Transaction ID : SA11.10910**  
 Amount of Each Receipt this Period **250.00**  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>16250.00</b>
<b>TOTAL</b> 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 87 OF 167
	<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. DON M. CATHY**  
Full Name (Last, First, Middle Initial)

Mailing Address 2895 LAKE PARK DR.

City JONESBORO State GA Zip Code 30236-4133

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

Name of Employer CHICK-FIL-A, INC. Occupation SENIOR VICE PRESIDENT

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 10 / 12 / 2012  
**Transaction ID : SA11.10934**

Amount of Each Receipt this Period 25000.00

CONTRIBUTION

**B. LINDA J. DIEBOLT**  
Full Name (Last, First, Middle Initial)

Mailing Address 46540 PICKFORD ST.

City NORTHVILLE State MI Zip Code 48168-3505

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 ▼ 25000.00

Date of Receipt 10 / 12 / 2012  
**Transaction ID : SA11.10933**

Amount of Each Receipt this Period 25000.00

CONTRIBUTION

**C. WILLIAM DOSSENBACH**  
Full Name (Last, First, Middle Initial)

Mailing Address 7194 HARBOUR TOWN DR

City WEST CHESTER State OH Zip Code 45069-6345

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 10 / 12 / 2012  
**Transaction ID : SA11.10904**

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 50250.00

**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 88 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. GEORGE FISHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 98549  
 City State Zip Code  
 DES MOINES WA 98198-0549  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HUNTING, FISHER & CO., PS, C.P.A.'S ACCOUNTANT  
 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  
 10 / 12 / 2012  
**Transaction ID : SA11.10950**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**B. WILLIAM O. FISHER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4000 BROADWAY SUITE 2  
 City State Zip Code  
 OAKLAND CA 94611-5670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 UNIV OF RICHMOND, SCHOOL OF LAW PROFESSOR  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 30000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012  
**Transaction ID : SA11.10930**  
 Amount of Each Receipt this Period  
 10000.00  
 CONTRIBUTION

**C. GEORGE GOLLUB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 412 PAXINOSA ROAD EAST  
 City State Zip Code  
 EASTON PA 18040-1338  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED MUSICIAN  
 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  
 10 / 12 / 2012  
**Transaction ID : SA11.10901**  
 Amount of Each Receipt this Period  
 250.00  
 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 89 OF 167
	<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. DANETTE HENDERSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 58 DEERWOOD DRIVE

City LITTLETON State CO Zip Code 80127-2616

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: **10 / 12 / 2012**  
Transaction ID : **SA11.10955**

Amount of Each Receipt this Period: **250.00**

CONTRIBUTION

**B. GEORGE D. JOHNSON JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 3524

City SPARTANBURG State SC Zip Code 29304-3524

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

Name of Employer: **JOHNSON DEVELOPMENT ASSOC, INC.** Occupation: **CHAIRMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100000.00**

Date of Receipt: **10 / 12 / 2012**  
Transaction ID : **SA11.10906**

Amount of Each Receipt this Period: **100000.00**

CONTRIBUTION

**C. PETER KALIKOW**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 PARK AVENUE  
25TH FLOOR

City NEW YORK State NY Zip Code 10178-0002

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

Name of Employer: **H.J. KALIKOW & CO., LLC** Occupation: **PRESIDENT**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **100000.00**

Date of Receipt: **10 / 12 / 2012**  
Transaction ID : **SA11.10928**

Amount of Each Receipt this Period: **100000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **200250.00**

**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 90 OF 167
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. JOHN KEELEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 111 W. JACKSON BLVD

City	State	Zip Code
CHICAGO	IL	60604-3589

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

Name of Employer	Occupation
KEELEY INVESTMENT CORP	STOCK BROKER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		12		2012

**Transaction ID : SA11.10917**

Amount of Each Receipt this Period  

1000.00
---------

**CONTRIBUTION**

**B. IVOR MASSEY JR.**  
Full Name (Last, First, Middle Initial)

Mailing Address 117 S 14TH STREET, SUITE 300

City	State	Zip Code
RICHMOND	VA	23219-4169

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

Name of Employer	Occupation
TRIAD, LC	OWNER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
40000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		12		2012

**Transaction ID : SA11.10908**

Amount of Each Receipt this Period  

40000.00
----------

**CONTRIBUTION**

**C. WALTER MCBEATH**  
Full Name (Last, First, Middle Initial)

Mailing Address 5029 TANGLEWOOD LANE

City	State	Zip Code
CLEVES	OH	45002-9415

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
10		12		2012

**Transaction ID : SA11.10947**

Amount of Each Receipt this Period  

1000.00
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**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	42000.00
<b>TOTAL</b> 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 91 OF 167  
(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. JOSEPH L. PETRELLI**  
 Mailing Address 3803 ROCKPOINTE DR.  
 City State Zip Code  
 COLUMBUS OH 43221-4949  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 DEMOTECH, INC. PRESIDENT  
 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  
 10 / 12 / 2012  
**Transaction ID : SA11.10938**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. HAROLD C. SIMMONS**  
 Mailing Address 5430 LBJ FWY  
 SUITE 1700  
 City State Zip Code  
 DALLAS TX 75240-2620  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CONTRAN CORPORATION OWNER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 12500000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012  
**Transaction ID : SA11.10907**  
 Amount of Each Receipt this Period  
 4000000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. EILEEN R. TERENS**  
 Mailing Address 182 PENSTEMON RD.  
 City State Zip Code  
 DILLON CO 80435-8358  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 12 / 2012  
**Transaction ID : SA11.10937**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 4002000.00  
**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 92 OF 167
	<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. MICHAEL TURNER**

Mailing Address 9005 THICKWOODS COVE

City AUSTIN State TX Zip Code 78735-8020

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

Name of Employer ALPHA CAPITAL MANAGEMENT Occupation INVESTMENTS

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2012  
**Transaction ID : SA11.10909**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 755 PAGE MILL ROAD

City PALO ALTO State CA Zip Code 94304-1046

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

Name of Employer SHV Occupation INVESTOR

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  
 10 / 12 / 2012  
**Transaction ID : SA11.10918**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. R WAYNE WOOD**

Mailing Address 5134 N WINDSONG CANYON DR

City TUCSON State AZ Zip Code 85749-7249

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

Name of Employer AZ COMMUNITY SURGEONS 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  
 10 / 12 / 2012  
**Transaction ID : SA11.10931**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3500.00
<b>TOTAL</b> 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 93 OF 167
	<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. SUMTER WATER CONSERVATION AUTHORITY, LLC**

Mailing Address 1020 LAKE SUMTER LANDING

City	State	Zip Code
THE VILLAGES	FL	32162-2699

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

Name of Employer	Occupation
N/A	N/A

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

**Transaction ID : SA11.10940**

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

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

Mailing Address 406 RIVERVIEW ROAD

City	State	Zip Code
SWARTHMORE	PA	19081-1221

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

Name of Employer	Occupation
C&D TECHNOLOGIES, INC.	ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2012

**Transaction ID : SA11.10973**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. CHERYL LINDHEIMER**

Mailing Address P.O. BOX 2090

City	State	Zip Code
MONROVIA	CA	91017-6090

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		13		2012

**Transaction ID : SA11.10971**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25350.00
<b>TOTAL</b> 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 94 OF 167
	<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. JAMES MCCANN**  
Full Name (Last, First, Middle Initial)

Mailing Address 596 FAIRWAY COURT

City CONROE State TX Zip Code 77302-3838

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

Name of Employer WORTHAM INSURANCE Occupation INSURANCE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2012

**Transaction ID : SA11.10976**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

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

Mailing Address 12860 N. 82ND. PL.

City SCOTTSDALE State AZ Zip Code 85260-5251

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

Name of Employer RETIRED Occupation RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2012

**Transaction ID : SA11.10968**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**C. HARVEY NELSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 22807 RAINBOW BEND LANE

City KATY State TX Zip Code 77450-3658

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

Name of Employer SELF-EMPLOYED Occupation CPA

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2012

**Transaction ID : SA11.10972**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1500.00
<b>TOTAL</b> 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 95 OF 167  
(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. STEPHAN NEWHOUSE**  
 Mailing Address 600 COCONUT PALM ROAD  
 City State Zip Code  
 VERO BEACH FL 32963-3713  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2012  
**Transaction ID : SA11.10960**  
 Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. RICHARD TINKLER**  
 Mailing Address 2344 ELBURY COURT  
 City State Zip Code  
 THOUSAND OAKS CA 91361-5095  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 RETIRED RETIRED  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2012  
**Transaction ID : SA11.10970**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. RICK DAVIES**  
 Mailing Address 104 CYPRESS POINT  
 City State Zip Code  
 ST SIMONS ISLAND GA 31522-2448  
 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  
 10 / 14 / 2012  
**Transaction ID : SA11.10978**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00  
**TOTAL** This Period (last page this line number only)..... ▶

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

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

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. RICHARD HALEY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 862157  
 City State Zip Code  
 MARIETTA GA 30062-0002  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INPO 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  
 10 / 14 / 2012  
**Transaction ID : SA11.10983**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B. ROBERT HANNAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12340 SW 60TH CT  
 City State Zip Code  
 PINECREST FL 33156-5652  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED PHYSICIAN  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 14 / 2012  
**Transaction ID : SA11.10981**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**C. LAURA OBRIEN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5901 KITTANSETT COURT  
 City State Zip Code  
 FORT WORTH TX 76132-4492  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HOMEMAKER HOMEMAKER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 14 / 2012  
**Transaction ID : SA11.11005**  
 Amount of Each Receipt this Period  
 2500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5250.00  
**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 97 OF 167
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	<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. TIMOTHY RADSICK**  
Full Name (Last, First, Middle Initial)

Mailing Address 7543 TYLERS VALLEY DR

City WEST CHESTER State OH Zip Code 45069-8660

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

Name of Employer US AIR FORCE Occupation MILITARY OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 14 / 2012  
Transaction ID : SA11.10999

Amount of Each Receipt this Period 250.00

CONTRIBUTION

**B. PHYLIS BARON**  
Full Name (Last, First, Middle Initial)

Mailing Address 13320 SOUTH VILLAGE SQUARE

City HUNTSVILLE State AL Zip Code 35803-3813

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 ▼ 5000.00

Date of Receipt 10 / 15 / 2012  
Transaction ID : SA11.11031

Amount of Each Receipt this Period 5000.00

CONTRIBUTION

**C. W. ED BOSARGE**  
Full Name (Last, First, Middle Initial)

Mailing Address 4203 YOAKUM BLVD SUITE 200

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 ▼ 900000.00

Date of Receipt 10 / 15 / 2012  
Transaction ID : SA11.11024

Amount of Each Receipt this Period 100000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 105250.00

**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 98 OF 167
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. GEORGE CHESTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 24  
 City DELAPLANE State VA Zip Code 20144-0024  
 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 10 / 15 / 2012  
**Transaction ID : SA11.11057**  
 Amount of Each Receipt this Period 1000.00  
 CONTRIBUTION

**B. THOMPSON DEAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 550 PARK AVE APT. 10-E  
 City NEW YORK State NY Zip Code 10065-7345  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer AVISTA CAPITAL PARTNERS Occupation CO-MANAGING PARTNER AND CO-CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 35000.00

Date of Receipt 10 / 15 / 2012  
**Transaction ID : SA11.11025**  
 Amount of Each Receipt this Period 10000.00  
 CONTRIBUTION

**C. LARRY GOLDENBERG**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 614 BRIDGEWATER CIRCLE  
 City DANVILLE State CA Zip Code 94526-3641  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer DIRECT LINE INC. Occupation MANAGEMENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 10 / 15 / 2012  
**Transaction ID : SA11.11049**  
 Amount of Each Receipt this Period 200.00  
 CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	11200.00
<b>TOTAL</b> 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 99 OF 167
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. STEPHEN GUINN**  
Full Name (Last, First, Middle Initial)

Mailing Address 144 RED SABLE

City THE WOODLANDS State TX Zip Code 77380-2694

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

Name of Employer HODGES COLLISION CENTERS Occupation PRESIDENT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11.11020**

Amount of Each Receipt this Period  
 250.00

CONTRIBUTION

**B. JAMA HALEY**  
Full Name (Last, First, Middle Initial)

Mailing Address 799 CRANDON BLVD., #1205

City KEY BISCAWAYNE State FL Zip Code 33149-2557

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 ▼ 2500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11.11017**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**C. MARGARET M. HILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 785 5TH AVE  
APT. #12

City NEW YORK State NY Zip Code 10022-1608

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

Name of Employer SELF-EMPLOYED Occupation ATTORNEY

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 17000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11.11034**

Amount of Each Receipt this Period  
 17000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 19750.00

**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 100 OF 167  
(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. MARK HOLECEK**

Mailing Address 5201 FAIRWAY OAKS DR

City State Zip Code  
WINDERMERE FL 34786-8934

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

Name of Employer Occupation  
AMS DIRECT CHAIRMAN

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  
 10 / 15 / 2012  
**Transaction ID : SA11.11010**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. KENNETH KLADIVA**

Mailing Address 2404 WITTINGTON BLVD

City State Zip Code  
ALEXANDRIA VA 22308-2365

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  
 10 / 15 / 2012  
**Transaction ID : SA11.11055**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

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

Mailing Address 1021 MAIN STREET

City State Zip Code  
HOUSTON TX 77002-6502

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

Name of Employer Occupation  
MCCORD DEVELOPMENT, INC. CHAIRMAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2012  
**Transaction ID : SA11.11012**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1750.00

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

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

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

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(check only one)  
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 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. ROY PFAUTCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52 PORTLAND PL  
 City SAINT LOUIS State MO Zip Code 63108-1242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer CIVIC SERVICE, INC. Occupation PRESIDENT  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 15 / 2012  
**Transaction ID : SA11.11026**  
 Amount of Each Receipt this Period 50000.00  
 CONTRIBUTION

**B. ELIZABETH STERN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 450 FORT HILL RD  
 City SCARSDALE State NY Zip Code 10583-2413  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer SELF-EMPLOYED Occupation QUILT DEALER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 19500.00

Date of Receipt 10 / 15 / 2012  
**Transaction ID : SA11.11013**  
 Amount of Each Receipt this Period 2500.00  
 CONTRIBUTION

**C. MARK TERRY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11515 SUMMERHILL  
 City HOUSTON State TX Zip Code 77024-5218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer EXXONMOBIL Occupation MANAGER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 15 / 2012  
**Transaction ID : SA11.11047**  
 Amount of Each Receipt this Period 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 53000.00  
**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 102 OF 167
	<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. ROBERT THRUN**  
Full Name (Last, First, Middle Initial)

Mailing Address 52 OFFICIAL ROAD

City ADDISON State IL Zip Code 60101-4519

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

Name of Employer ANCHOR PRODUCTS CO., INC. Occupation 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  
 10 / 15 / 2012

**Transaction ID : SA11.11050**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**B. COURTNEY VANDERHAM**  
Full Name (Last, First, Middle Initial)

Mailing Address 3114 GROUSE PT

City CANYON State TX Zip Code 79015-6312

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

Name of Employer ASCO EQUIPMENT Occupation ACCOUNTANT

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  
 10 / 15 / 2012

**Transaction ID : SA11.11019**

Amount of Each Receipt this Period  
 500.00

CONTRIBUTION

**C. JAMIE C. ZISSIS**  
Full Name (Last, First, Middle Initial)

Mailing Address 674 ALPINE VIEW DR.

City INCLINE VILLAGE State NV Zip Code 89451-8935

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

Name of Employer BBAM Occupation AIRCRAFT LEASING

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
50000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2012

**Transaction ID : SA11.11029**

Amount of Each Receipt this Period  
 50000.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	53000.00
<b>TOTAL</b> 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

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(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. PORTLAND COURT LIMITED PARTNERSHIP**

Mailing Address 2187 HERMOSA DR.

City State Zip Code  
BOULDER CO 80304-2306

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

Name of Employer Occupation  
N/A N/A

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 15 / 2012  
**Transaction ID : SA11.11035**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. HELEN ALEXANDER**

Mailing Address 4545 OLD FRANKFORT PIKE

City State Zip Code  
LEXINGTON KY 40510-9664

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

Name of Employer Occupation  
SELF-EMPLOYED FARM OWNER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11092**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. LAURIE S. COVINGTON**

Mailing Address 3524 EAST AVENUE R  
SPACE 291

City State Zip Code  
PALMDALE CA 93550-5095

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

Name of Employer Occupation  
UNEMPLOYED UNEMPLOYED

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
255.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11071**

Amount of Each Receipt this Period  
35.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 2785.00

**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 104 OF 167
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

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

Mailing Address **4711 WATERBECK STREET**

City <b>FULSHEAR</b>	State <b>TX</b>	Zip Code <b>77441-4174</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer <b>MAGNUM PRODUCTION COMPANY</b>	Occupation <b>PETROLEUM ENGINEER</b>
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt  
**10 / 16 / 2012**

**Transaction ID : SA11.11102**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. DAVID G. HERRO**

Mailing Address **TWO NORTH LASALLE STREET  
SUITE 500**

City <b>CHICAGO</b>	State <b>IL</b>	Zip Code <b>60602-3703</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>HARRIS ASSOCIATES, LP</b>	Occupation <b>PARTNER &amp; CHIEF INVESTMENT OFFICER</b>
--	---

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250000.00**

Date of Receipt  
**10 / 16 / 2012**

**Transaction ID : SA11.11095**

Amount of Each Receipt this Period  
**50000.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. DOUGLAS HOEKSEMA**

Mailing Address **761 PINE TREE ROAD**

City <b>WINTER PARK</b>	State <b>FL</b>	Zip Code <b>32789-1508</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>DOUGLAS PARTNERS LLC</b>	Occupation <b>REAL ESTATE DEVELOPER</b>
---	--

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1025.00**

Date of Receipt  
**10 / 16 / 2012**

**Transaction ID : SA11.11106**

Amount of Each Receipt this Period  
**175.00**

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>51175.00</b>
<b>TOTAL</b> 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 105 OF 167  
(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 LIEBELER**

Mailing Address 300 NEW JERSEY AVENUE, SUITE 1000

City State Zip Code  
WASHINGTON DC 20001-2268

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

Name of Employer Occupation  
SIEMENS CORPORATION ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11097**

Amount of Each Receipt this Period  
2500.00

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 ▼  
500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11072**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

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

Mailing Address 993 ROYAL OAKS DR.

City State Zip Code  
APOPKA FL 32703-8253

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

Name of Employer Occupation  
SELF-EMPLOYED ENTERTAINER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11099**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 2800.00

**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 106 OF 167
	<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. HUGH O'FARRELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 511 BROOK HOLLOW CIRCLE

City	State	Zip Code
MARIETTA	GA	30067-4801

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

Name of Employer	Occupation
RETIRED	RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11077**

Amount of Each Receipt this Period  
**200.00**

CONTRIBUTION

**B. ED ONEILL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1180 OLD TOPANGA CYN. RD.

City	State	Zip Code
TOPANGA	CA	90290-3824

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

Name of Employer	Occupation
ED ONEILL CONSTRUCTION	ENGINEER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11062**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**C. LESLIE SACKS**  
Full Name (Last, First, Middle Initial)

Mailing Address 11640 SAN VICENTE BLVD, SUITE 108

City	State	Zip Code
LOS ANGELES	CA	90049-6521

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

Name of Employer	Occupation
SELF-EMPLOYED	GALLERIST

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  
 10 / 16 / 2012  
**Transaction ID : SA11.11105**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1450.00</b>
<b>TOTAL</b> 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 107 OF 167  
(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. ELIZABETH STERN**

Mailing Address 450 FORT HILL RD

City State Zip Code  
SCARSDALE NY 10583-2413

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

Name of Employer Occupation  
SELF-EMPLOYED QUILT DEALER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
19500.00

Date of Receipt  
 /  /   
 10 / 16 / 2012  
**Transaction ID : SA11.11122**

Amount of Each Receipt this Period  
  
 2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. LINDA SUHLER**

Mailing Address 6512 E MONTEROSA ST

City State Zip Code  
SCOTTSDALE AZ 85251-3100

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  
 /  /   
 10 / 16 / 2012  
**Transaction ID : SA11.11103**

Amount of Each Receipt this Period  
  
 500.00

CONTRIBUTION

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

Mailing Address 236 SUNNYSIDE RD.

City State Zip Code  
NEWMANSTOWN PA 17073-8853

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

Name of Employer Occupation  
LANCASTER GENERAL MEDICAL GROUP PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 /  /   
 10 / 16 / 2012  
**Transaction ID : SA11.11125**

Amount of Each Receipt this Period  
  
 250.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶  3250.00

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

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

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

FOR LINE NUMBER: PAGE 108 OF 167  
(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. RICH TEHRANI**  
 Mailing Address 642 WESTOVER RD  
 City State Zip Code  
 STAMFORD CT 06902-1321  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 TMC CEO  
 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  
 10 / 16 / 2012  
**Transaction ID : SA11.11065**  
 Amount of Each Receipt this Period  
 25.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROBERTA J THOMPSON**  
 Mailing Address 2900 N GOVERNMENT WAY #321  
 City State Zip Code  
 COEUR D ALENE ID 83815-3751  
 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  
 10 / 16 / 2012  
**Transaction ID : SA11.11076**  
 Amount of Each Receipt this Period  
 100.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. LEE TIMMINS**  
 Mailing Address P.O. BOX 650, C/O IPS  
 City State Zip Code  
 NEW YORK NY 10008-0650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 HINES INTERNATIONAL, INC. REAL ESTATE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11064**  
 Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 625.00  
**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 109 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. GEORGE G. DANIELS REVOCABLE TRUST**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 590007  
 City ORLANDO State FL Zip Code 32859-0007  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A N/A  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 150000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11114**  
 Amount of Each Receipt this Period  
 50000.00  
 CONTRIBUTION

**B. MATRIX ENERGY, LLC**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 190  
 City LOVELY State KY Zip Code 41231-0190  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A N/A  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 15000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11113**  
 Amount of Each Receipt this Period  
 15000.00  
 CONTRIBUTION

**C. WALTER ENERGY, INC.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3000 RIVERCHASE GALLERIA SUITE 1700  
 City BIRMINGHAM State AL Zip Code 35244-2378  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 N/A N/A  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 20000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2012  
**Transaction ID : SA11.11117**  
 Amount of Each Receipt this Period  
 20000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 85000.00  
**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 110 OF 167
	<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. FREDERICK CLEMENTS**  
Full Name (Last, First, Middle Initial)

Mailing Address 2933 CATHEDRAL AVENUE NW

City WASHINGTON	State DC	Zip Code 20008-3406
--------------------	-------------	------------------------

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
10		17		2012

**Transaction ID : SA11.11166**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

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

Mailing Address 13183 SEAGROVE ST

City SAN DIEGO	State CA	Zip Code 92130-3214
-------------------	-------------	------------------------

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

Name of Employer AM1 LLC	Occupation TECHNOLOGY CONSULTANT
-----------------------------	-------------------------------------

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
10		17		2012

**Transaction ID : SA11.11212**

Amount of Each Receipt this Period  
300.00

CONTRIBUTION

**C. TIMOTHY DOLEZAL**  
Full Name (Last, First, Middle Initial)

Mailing Address 1326 E. WASHINGTON ST

City SOUTH BEND	State IN	Zip Code 46617-3341
--------------------	-------------	------------------------

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

Name of Employer UNIVERSITY OF NOTRE DAME	Occupation INVESTMENT PROFESSIONAL
--	---------------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2012

**Transaction ID : SA11.11139**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	800.00
<b>TOTAL</b> 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 111 OF 167  
(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. WILL DYER**  
 Mailing Address P.O. BOX 14570  
 City State Zip Code  
 MILL CREEK WA 98082-2570  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 SELF-EMPLOYED TRADE  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11218**  
 Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. RICHARD B. GILLIAM**  
 Mailing Address P.O. BOX 820  
 City State Zip Code  
 KESWICK VA 22947-0820  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 CUMBERLAND RESOURCE CORPORATION CHAIRMAN & CEO  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 500000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11165**  
 Amount of Each Receipt this Period  
 250000.00  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. FLOYD D. GOTTWALD JR.**  
 Mailing Address 300 HERNDON ROAD  
 City State Zip Code  
 RICHMOND VA 23229-8214  
 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 ▼  
 100000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11188**  
 Amount of Each Receipt this Period  
 50000.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 300250.00  
**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 112 OF 167
	<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) <b>A. PAUL J. ISAAC</b>		Date of Receipt 10 / 17 / 2012 <b>Transaction ID : SA11.11174</b>
Mailing Address 75 PROSPECT AVE		Amount of Each Receipt this Period 100000.00
City LARCHMONT	State NY	Zip Code 10538-3634
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer FORT HOOSAC MANAGEMENT, LLC	Occupation ANALYST	
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>B. ED JAMES</b>		Date of Receipt 10 / 17 / 2012 <b>Transaction ID : SA11.11132</b>
Mailing Address 3739 ALBANS ROAD		Amount of Each Receipt this Period 250.00
City HOUSTON	State TX	Zip Code 77005-2001
FEC ID number of contributing federal political committee. C		CONTRIBUTION
Name of Employer MRH RETAIL, INC.	Occupation COMMERCIAL REAL ESTATE	
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>C. DENNIS M. JONES</b>		Date of Receipt 10 / 17 / 2012 <b>Transaction ID : SA11.11180</b>
Mailing Address 1700 S WARSON RD		Amount of Each Receipt this Period 100000.00
City SAINT LOUIS	State MO	Zip Code 63124-1146
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 ▼ 100000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	200250.00
<b>TOTAL</b> 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 113 OF 167
	<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. HENRY KANE**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 729

City BARTLESVILLE State OK Zip Code 74005-0729

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 ▼  
2500.00

Date of Receipt  
10 / 17 / 2012  
**Transaction ID : SA11.11143**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

**B. STEVEN KRISTEL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 75 COVES RUN

City SYOSSET State NY Zip Code 11791-1008

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

Name of Employer PRECISION DISCOVERY, LLC Occupation CHAIRMAN

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
10 / 17 / 2012  
**Transaction ID : SA11.11263**

Amount of Each Receipt this Period  
5000.00

CONTRIBUTION

**C. STALLWORTH LARSON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6845 NORTH OCEAN BOULEVARD  
MEWS SOUTH 5

City OCEAN RIDGE State FL Zip Code 33435-3334

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  
10 / 17 / 2012  
**Transaction ID : SA11.11172**

Amount of Each Receipt this Period  
250.00

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: (check only one)	PAGE 114 OF 167
	<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**

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

Mailing Address 199 MOHAWK DR.

City State Zip Code  
PITTSBURGH PA 15228-1564

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

Name of Employer Occupation  
SELF-EMPLOYED COURIER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
10 / 17 / 2012  
**Transaction ID : SA11.11202**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ERLE A. NYE**

Mailing Address 1211 CREEK FOREST DRIVE

City State Zip Code  
DALLAS TX 75230

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

Name of Employer Occupation  
EN CONSULTING CONSULTANT

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
15000.00

Date of Receipt  
10 / 17 / 2012  
**Transaction ID : SA11.11264**

Amount of Each Receipt this Period  
15000.00

CONTRIBUTION

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

Mailing Address 535 E 86TH STREET  
APT. 20D

City State Zip Code  
NEW YORK NY 10028-7533

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

Name of Employer Occupation  
RETIRED RETIRED

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2000.00

Date of Receipt  
10 / 17 / 2012  
**Transaction ID : SA11.11261**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....▶ 16500.00

**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 115 OF 167  
(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. A. JERROLD PERENCHIO**

Mailing Address 1999 AVENUE OF THE STARS, STE 3050

City State Zip Code  
LOS ANGELES CA 90067-0000

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

Name of Employer Occupation  
CHARTWELL PARTNERS, LLC EXECUTIVE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11148**

Amount of Each Receipt this Period  
500000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. J. STEPHEN PULLUM**

Mailing Address 382 VISTA OAK DRIVE

City State Zip Code  
LONGWOOD FL 32779-3067

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

Name of Employer Occupation  
PULLUM & PULLUM, PA LAWYER

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  
 10 / 17 / 2012  
**Transaction ID : SA11.11187**

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. WILLIAM G. REED**

Mailing Address 935 BLEMER RD

City State Zip Code  
DANVILLE CA 94526-1501

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 ▼  
550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11163**

Amount of Each Receipt this Period  
200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 510200.00

**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

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(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. EDDY J ROGERS JR**

Mailing Address 3101 RED CORRAL RANCH ROAD

City State Zip Code  
WIMBERLEY TX 78676-4129

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

Name of Employer Occupation  
ANDREWS KURTH LLP ATTORNEY

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11150**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ROBERT M. ROSENTHAL**

Mailing Address 11708 CANTON PLACE

City State Zip Code  
STUDIO CITY CA 91604-4165

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 ▼  
50000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11233**

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

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

Mailing Address 1021 SANDOVAL DRIVE

City State Zip Code  
VIRGINIA BEACH VA 23454-7207

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

Name of Employer Occupation  
CITY OF VIRGINIA BEACH PSYCHOTHERAPIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11135**

Amount of Each Receipt this Period  
50.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25300.00

**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 117 OF 167  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)  
**A. ROBERT SCHWAB**

Mailing Address 5123 E CALLE DEL NORTE

City State Zip Code  
PHOENIX AZ 85018-4427

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 ▼  
1500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11170**

Amount of Each Receipt this Period  
1500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. JUDY STEPHENSON**

Mailing Address 711 WESTFIELD LN.

City State Zip Code  
FRIENDSWOOD TX 77546-6325

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

Name of Employer Occupation  
MCDONALD ELECTRIC OWNER

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  
 10 / 17 / 2012  
**Transaction ID : SA11.11201**

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. ELIZABETH STERN**

Mailing Address 450 FORT HILL RD

City State Zip Code  
SCARSDALE NY 10583-2413

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

Name of Employer Occupation  
SELF-EMPLOYED QUILT DEALER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
19500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11207**

Amount of Each Receipt this Period  
2500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5000.00

**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 118 OF 167  
(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. LEHRUE STEVENS M.D.**

Mailing Address 3222 HENDERSON BAYOU RD.

City State Zip Code  
LAKE CHARLES LA 70605-2236

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

Name of Employer Occupation  
SELF-EMPLOYED PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11171**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. EILEEN TIERNEY**

Mailing Address 2 COLUMBUS AVENUE

City State Zip Code  
NEW YORK NY 10023-6924

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

Name of Employer Occupation  
TIERNEY PARTNERS, LLC EXECUTIVE RECRUITER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11169**

Amount of Each Receipt this Period  
100.00

CONTRIBUTION

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

Mailing Address 2412 ELIZABETH CT.

City State Zip Code  
UPLAND CA 91784-1311

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

Name of Employer Occupation  
SELF-EMPLOYED ORTHODONTIST

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11208**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 850.00

**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 119 OF 167  
(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. FRANCIS T. VINCENT JR.**

Mailing Address 145 SAGO PALM RD

City State Zip Code  
VERO BEACH FL 32963-3702

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

Name of Employer Occupation  
VINCENT ENTERPRISES PRIVATE INVESTOR

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
75000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11147**

Amount of Each Receipt this Period  
25000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. ARDATH YAMAGA**

Mailing Address 3848 KESWICK ROAD

City State Zip Code  
LACANADA CA 91011-3945

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

Name of Employer Occupation  
CHILDREN'S HOSPITAL ARCADIA SPECIALTY PHYSICIAN

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11195**

Amount of Each Receipt this Period  
250.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MERS, INC.**

Mailing Address P.O. BOX 73525

City State Zip Code  
HOUSTON TX 77273-3525

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

Name of Employer Occupation  
N/A N/A

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
25000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11234**

Amount of Each Receipt this Period  
10000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 35250.00

**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 120 OF 167
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A. VASALLO SLOANE PL**  
Full Name (Last, First, Middle Initial)  
Mailing Address 12394 SW 82 AVENUE

City PINECREST	State FL	Zip Code 33156-5255
-------------------	-------------	------------------------

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 ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 17 / 2012  
**Transaction ID : SA11.11155**

Amount of Each Receipt this Period  
500.00

CONTRIBUTION

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11628160.00

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

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

FOR LINE NUMBER: PAGE 121 OF 167  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

**A.** Full Name (Last, First, Middle Initial)  
**KIRK WHITWORTH**

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON	State DC	Zip Code 20005
--------------------	-------------	-------------------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **928.20**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	11	/	2012

**Transaction ID : R.001**

Amount of Each Receipt this Period  

928.20
--------

**REIMBURSEMENT - HEALTH INSURANCE**

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

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

--

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer	Occupation
------------------	------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

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

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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>928.20</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>928.20</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. RICHARD SALES MEDIA LLC**

Mailing Address 9010 S. 10TH ST.

City PHOENIX State AZ Zip Code 85042

Purpose of Disbursement  
WEB VIDEO

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 01 / 2012

Transaction ID : SB.52

Amount of Each Disbursement this Period

3000.00

**B. CROSSROADS MEDIA LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 66 CANAL CENTER PLAZA, SUITE 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
SEE SCHEDULE E

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2012

Transaction ID : SB.32

Amount of Each Disbursement this Period

-9071481.86

**C. CROSSROADS MEDIA LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 66 CANAL CENTER PLAZA, SUITE 555

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
SEE SCHEDULE E

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2012

Transaction ID : SB.33

Amount of Each Disbursement this Period

-1697722.00

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

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

-10766203.86

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. ELAVON**

Mailing Address TWO CONCOURSE PKWY, STE 800

City ATLANTA State GA Zip Code 30328

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2012

Transaction ID : SB.35

Amount of Each Disbursement this Period

23394.05

Full Name (Last, First, Middle Initial)

**B. MENTZER MEDIA SERVICES INC**

Mailing Address 600 FAIRMONT AVE, SUITE 306

City TOWSON State MD Zip Code 21286

Purpose of Disbursement  
SEE SCHEDULE E

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 02 / 2012

Transaction ID : SB.45

Amount of Each Disbursement this Period

-1972987.84

Full Name (Last, First, Middle Initial)

**C. PNC BANK**

Mailing Address ONE FINANCIAL PARKWAY

City KALAMAZOO State MI Zip Code 49009

Purpose of Disbursement  
CREDIT CARD PAYMENT - SEE MEMO ENTRIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2012

Transaction ID : SB21CCP.1

Amount of Each Disbursement this Period

20630.97

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

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

-1928962.82

**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. AMERICAN AIRLINES**

Mailing Address 4333 AMON CARTER BLVD

City State Zip Code  
FT WORTH TX 76155

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.1

Amount of Each Disbursement this Period

249.90
--------

[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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.2

Amount of Each Disbursement this Period

25.00
-------

[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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.3

Amount of Each Disbursement this Period

30.00
-------

[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

**Transaction ID : SC21CCD.4**

Amount of Each Disbursement this Period

30.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 7704 LEESBURG PIKE

City State Zip Code  
FALLS CHURCH VA 22043

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

**Transaction ID : SC21CCD.6**

Amount of Each Disbursement this Period

1000.00
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 7704 LEESBURG PIKE

City State Zip Code  
FALLS CHURCH VA 22043

Purpose of Disbursement  
DATABASE MANAGEMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

**Transaction ID : SC21CCD.7**

Amount of Each Disbursement this Period

500.00
--------

[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. COURTYARD BY MARRIOTT**

Mailing Address 10400 FERNWOOD ROAD

City State Zip Code  
BETHESDA MD 20817

Purpose of Disbursement  
LODGING

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
10		04		2012

Transaction ID : **SC21CCD.8**

Amount of Each Disbursement this Period

137.12
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. CUSTOM SCOOP**

Mailing Address P.O. BOX 609

City State Zip Code  
CONCORD NH 03302

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2012

Transaction ID : **SC21CCD.9**

Amount of Each Disbursement this Period

407.00
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. DATAWATCH SYSTEMS INC**

Mailing Address 4401 EAST WEST HIGHWAY #500

City State Zip Code  
BETHESDA MD 20814

Purpose of Disbursement  
OFFICE SUPPLIES

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
10		04		2012

Transaction ID : **SC21CCD.10**

Amount of Each Disbursement this Period

53.00
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[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. ENTERPRISE RENT-A-CAR**

Mailing Address 600 CORPORATE PARK DRIVE

City ST. LOUIS State MO Zip Code 63105

Purpose of Disbursement  
CAR RENTAL

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2012

Transaction ID : SC21CCD.11

Amount of Each Disbursement this Period

209.44

[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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2012

Transaction ID : SC21CCD.12

Amount of Each Disbursement this Period

802.19

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. FRONTIER AIRLINES**

Mailing Address 701 TOWER ROAD

City DENVER State CO Zip Code 80249

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 04 / 2012

Transaction ID : SC21CCD.13

Amount of Each Disbursement this Period

364.80

[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. PNC BANK**

Mailing Address ONE FINANCIAL PARKWAY

City KALAMAZOO State MI Zip Code 49009

Purpose of Disbursement  
VENDOR CREDIT - CREDIT CARD REWARDS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.17

Amount of Each Disbursement this Period

-335.09
---------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. PREMIERE GLOBAL SERVICES INC**

Mailing Address 3399 PEACHTREE ROAD, STE 700

City ATLANTA State GA Zip Code 30326

Purpose of Disbursement  
CONFERENCE CALLS

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.18

Amount of Each Disbursement this Period

781.66
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. REAGAN NATIONAL AIRPORT**

Mailing Address 1 AVIATION CIRCLE

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
PARKING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.19

Amount of Each Disbursement this Period

52.50
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[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647-1CR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.22

Amount of Each Disbursement this Period

2.50
------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. SOUTHWEST AIRLINES**

Mailing Address P.O. BOX 36647-1CR

City DALLAS State TX Zip Code 75235

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.23

Amount of Each Disbursement this Period

270.80
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. ST REGIS HOTEL**

Mailing Address 315 EAST DEAN STREET

City ASPEN State CO Zip Code 81611

Purpose of Disbursement  
MEETING EXPENSE - FOOD/BEVERAGE, LODGING

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.24

Amount of Each Disbursement this Period

2251.88
---------

[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. STAPLES**

Mailing Address 500 STAPLES DRIVE

City FRAMINGTON State MA Zip Code 01702

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.25

Amount of Each Disbursement this Period

226.41
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. STAPLES**

Mailing Address 500 STAPLES DRIVE

City FRAMINGTON State MA Zip Code 01702

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.26

Amount of Each Disbursement this Period

280.90
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. THE TAMPA CLUB**

Mailing Address 101 EAST KENNEDY BLVD, STE 4200

City TAMPA State FL Zip Code 33602

Purpose of Disbursement  
MEETING EXPENSE - FOOD / BEVERAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.27

Amount of Each Disbursement this Period

1749.14
---------

[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. UNITED AIRLINES**

Mailing Address P.O. BOX 66100

City State Zip Code  
CHICAGO IL 60666

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : **SC21CCD.28**

Amount of Each Disbursement this Period

841.59
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. UNITED AIRLINES**

Mailing Address P.O. BOX 66100

City State Zip Code  
CHICAGO IL 60666

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : **SC21CCD.29**

Amount of Each Disbursement this Period

600.80
--------

[MEMO ITEM]

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : **SC21CCD.30**

Amount of Each Disbursement this Period

460.00
--------

[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2012

Transaction ID : SC21CCD.31

Amount of Each Disbursement this Period

435.30
--------

[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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2012

Transaction ID : SC21CCD.32

Amount of Each Disbursement this Period

216.70
--------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. 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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2012

Transaction ID : SC21CCD.33

Amount of Each Disbursement this Period

198.80
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[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address P.O. BOX 223745

City DALLAS State TX Zip Code 75222

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.34

Amount of Each Disbursement this Period

45.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address P.O. BOX 223745

City DALLAS State TX Zip Code 75222

Purpose of Disbursement  
POSTAGE

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.35

Amount of Each Disbursement this Period

60.00
-------

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

**C. WIDGETMAKR**

Mailing Address 7704 LEESBURG PIKE

City FALLS CHURCH State VA Zip Code 22043

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2012			

Transaction ID : SC21CCD.36

Amount of Each Disbursement this Period

8539.69
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[MEMO ITEM]

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

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

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. ANDREW FINNAN**

Mailing Address 2130 P STREET NW #406

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement  
CONSULTING, MEDIA

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

**Transaction ID : SB.2**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. STEPHANIE POLIS**

Mailing Address 5145 TILDEN STREET NW

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement  
CONSULTING, RESEARCH

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

**Transaction ID : SB.17**

Amount of Each Disbursement this Period

7500.00

Full Name (Last, First, Middle Initial)

**C. ACCION INTERNATIONAL**

Mailing Address 56 ROLAND STREET, STE 300

City BOSTON State MA Zip Code 02129

Purpose of Disbursement  
OFFICE RENT

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

**Transaction ID : SB.20**

Amount of Each Disbursement this Period

3780.00

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

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

16280.00

**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. AMERICAN EXPRESS**

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement  
CREDIT CARD PROCESSING FEES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB.22

Amount of Each Disbursement this Period

19261.62
----------

Full Name (Last, First, Middle Initial)

**B. AMERICAN VIEWPOINT INC**

Mailing Address 300 NORTH LEE STREET, STE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB.23

Amount of Each Disbursement this Period

26000.00
----------

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB.24

Amount of Each Disbursement this Period

339.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

45600.62
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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:

Date of Disbursement

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

Transaction ID : SB.25

Amount of Each Disbursement this Period

12596.00
----------

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:

Date of Disbursement

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

Transaction ID : SB.26

Amount of Each Disbursement this Period

634.84
--------

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:

Date of Disbursement

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

Transaction ID : SB.27

Amount of Each Disbursement this Period

956.23
--------

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

14187.07
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

**Transaction ID : SB.30**

Amount of Each Disbursement this Period

9040.01

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. CFL ASSOCIATES**

Mailing Address 4189 S FOUR MILE RUN DRIVE #404

City ARLINGTON State VA Zip Code 22204

Purpose of Disbursement  
DONOR DEVELOPMENT

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

**Transaction ID : SB.31**

Amount of Each Disbursement this Period

2416.16

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. FAIRFAX GROUP LLC**

Mailing Address 6830 ELM STREET, STE 500

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement  
CONSULTING, FACILITY SERVICES

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

**Transaction ID : SB.36**

Amount of Each Disbursement this Period

3450.00

Category/  
Type

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

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

14906.17

**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 PO BOX 791416

City State Zip Code  
BALTIMORE MD 21279

Purpose of Disbursement  
OFFICE SUPPLIES

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  
10 / 05 / 2012

Transaction ID : SB.37

Amount of Each Disbursement this Period

161.66

Full Name (Last, First, Middle Initial)

**B. GRAND SLAM FINANCE INC**

Mailing Address 5930 REPUBLIC OF TEXAS BLVD.

City State Zip Code  
AUSTIN TX 78735

Purpose of Disbursement  
BOOKKEEPING / COMPLIANCE

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  
10 / 05 / 2012

Transaction ID : SB.38

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

**C. GUESTBOOKER.COM LLC**

Mailing Address 1204 VINTAGE GROVE LANE

City State Zip Code  
FRANKLIN TN 37064

Purpose of Disbursement  
CONSULTING, COMMUNICATIONS

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  
10 / 05 / 2012

Transaction ID : SB.39

Amount of Each Disbursement this Period

2500.00

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

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

3111.66

**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. KANTAR MEDIA**

Mailing Address PO BOX 7247-9301

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : SB.42

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

**B. NMB RESEARCH**

Mailing Address 206 N. FAYETTE STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : SB.47

Amount of Each Disbursement this Period

115125.00

Full Name (Last, First, Middle Initial)

**C. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : SB.49

Amount of Each Disbursement this Period

19500.00

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

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

147125.00

**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. 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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB.53**

Amount of Each Disbursement this Period

3160.00

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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB.54**

Amount of Each Disbursement this Period

6000.00

Full Name (Last, First, Middle Initial)

**C. TARGETED VICTORY**

Mailing Address P.O. BOX 2187

City ARLINGTON State VA Zip Code 22202

Purpose of Disbursement  
TO VOID CK#1138 DATED 06/07/12

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB.55**

Amount of Each Disbursement this Period

-6000.00

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

3160.00

**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. 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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB.57**

Amount of Each Disbursement this Period

7500.00

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB.59**

Amount of Each Disbursement this Period

15762.00

Full Name (Last, First, Middle Initial)

**C. THE MK GROUP LLC**

Mailing Address 5905 GLOSTER ROAD

City BETHESDA State MD Zip Code 20816

Purpose of Disbursement  
TO VOID CK#1122 DATED 06/01/12 - RECUT ON 10/05/12

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 05 / 2012

Transaction ID : **SB.60**

Amount of Each Disbursement this Period

-7500.00

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

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

15762.00

**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 TARRANCE GROUP INC**

Mailing Address 201 N. UNION STREET, STE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB.61

Amount of Each Disbursement this Period

77282.00
----------

Full Name (Last, First, Middle Initial)

**B. VOTER CONSUMER RESEARCH INC**

Mailing Address 501 C STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB.65

Amount of Each Disbursement this Period

25700.00
----------

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2012			

Transaction ID : SB.21

Amount of Each Disbursement this Period

1100.00
---------

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

104082.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. CAREFIRST BCBS**

Mailing Address PO BOX 79749

City BALTIMORE State MD Zip Code 21279

Purpose of Disbursement  
HEALTH INSURANCE

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address 45 NORTH HILL DRIVE, SUITE 100

City WARRENTON State VA Zip Code 20186

Purpose of Disbursement  
LEGAL SERVICES

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2012

Transaction ID : SB.28

Amount of Each Disbursement this Period

192.18

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2012

Transaction ID : SB.29

Amount of Each Disbursement this Period

6229.00

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2012

Transaction ID : SB.40

Amount of Each Disbursement this Period

25000.00

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

31421.18

**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. 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:

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2012

Transaction ID : SB.41

Amount of Each Disbursement this Period

11000.00

Full Name (Last, First, Middle Initial)

**B. LEXISNEXIS**

Mailing Address P.O. BOX 7247-7090

City PHILADELPHIA State PA Zip Code 19170

Purpose of Disbursement  
SUBSCRIPTION

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2012

Transaction ID : SB.43

Amount of Each Disbursement this Period

2553.54

Full Name (Last, First, Middle Initial)

**C. PUBLIC OPINION STRATEGIES**

Mailing Address 214 NORTH FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
POLLING

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 12 / 2012

Transaction ID : SB.50

Amount of Each Disbursement this Period

13750.00

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

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

27303.54

**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  
WEBSITE HOSTING / DEVELOPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2012			

Transaction ID : **SB.56**

Amount of Each Disbursement this Period

6000.00
---------

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  
DONOR DEVELOPMENT

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2012			

Transaction ID : **SB.58**

Amount of Each Disbursement this Period

245.69
--------

Full Name (Last, First, Middle Initial)

**C. UPCO LOCK & SAFE SERVICE**

Mailing Address 1800 1/2 11TH STREET NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
OFFICE SUPPLIES

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			12			2012			

Transaction ID : **SB.62**

Amount of Each Disbursement this Period

111.83
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

6357.52
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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. VOTER CONSUMER RESEARCH INC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		12		2012

Mailing Address 501 C STREET NE

**Transaction ID : SB.66**

City WASHINGTON State DC Zip Code 20002

Amount of Each Disbursement this Period

73250.00
----------

Purpose of Disbursement  
POLLING

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. WILSON-GRAND COMMUNICATIONS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		12		2012

Mailing Address 429 N. ST. ASAPH ST.

**Transaction ID : SB.67**

City ALEXANDRIA State VA Zip Code 22314

Amount of Each Disbursement this Period

23106.86
----------

Purpose of Disbursement  
TV/ MEDIA PRODUCTION

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. JONATHAN COLLEGIO**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2012

Mailing Address 1401 NEW YORK AVE NW, STE 1200

**Transaction ID : SB.10**

City WASHINGTON State DC Zip Code 20005

Amount of Each Disbursement this Period

1351.04
---------

Purpose of Disbursement  
PAYROLL

--

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

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

97707.90
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

Transaction ID : SB.7

Amount of Each Disbursement this Period

689.50

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

Transaction ID : SB.6

Amount of Each Disbursement this Period

1730.31

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 15 / 2012

Transaction ID : SB.16

Amount of Each Disbursement this Period

466.20

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

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

2886.01

**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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

**Transaction ID : SB.18**

Amount of Each Disbursement this Period

3408.00

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

**Transaction ID : SB.1**

Amount of Each Disbursement this Period

2647.92

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

**Transaction ID : SB.5**

Amount of Each Disbursement this Period

3891.56

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

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

9947.48

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. JOHN MILAM**

Mailing Address 1401 NEW YORK AVE NW, STE 1200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
PAYROLL

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2012

Transaction ID : **SB.9**

Amount of Each Disbursement this Period

1403.74

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2012

Transaction ID : **SB.14**

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 15 / 2012

Transaction ID : **SB.3**

Amount of Each Disbursement this Period

1160.59

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

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

4285.96

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

**Transaction ID : SB.8**

Amount of Each Disbursement this Period

1415.22

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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

**Transaction ID : SB.12**

Amount of Each Disbursement this Period

337.36

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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

**Transaction ID : SB.11**

Amount of Each Disbursement this Period

645.29

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

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

2397.87

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB.4**

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB.13**

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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Transaction ID : **SB.19**

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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB.15**

Amount of Each Disbursement this Period

1628.66

Full Name (Last, First, Middle Initial)

**B. DEPARTMENT OF EMPLOYMENT SERVICES**

Mailing Address PO BOX 9664

City WASHINGTON State DC Zip Code 20090

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB.34**

Amount of Each Disbursement this Period

20.13

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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB.46**

Amount of Each Disbursement this Period

83.00

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

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

1731.79

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. 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:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB.48**

Amount of Each Disbursement this Period

1586.22

Full Name (Last, First, Middle Initial)

**B. US DEPARTMENT OF TREASURY**

Mailing Address 1500 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20220

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB.63**

Amount of Each Disbursement this Period

8507.14

Full Name (Last, First, Middle Initial)

**C. VIRGINIA DEPT OF TAXATION**

Mailing Address P.O. BOX 1777

City RICHMOND State VA Zip Code 23218

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 15 / 2012

Transaction ID : **SB.64**

Amount of Each Disbursement this Period

260.39

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

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

10353.75

**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. 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:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 16 / 2012

Transaction ID : SB.44

Amount of Each Disbursement this Period

415.00

**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 / 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 / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

415.00

-12132367.05

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

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NAME OF COMMITTEE (In Full)  
**American Crossroads**

Full Name (Last, First, Middle Initial)

**A. REPUBLICAN STATE LEADERSHIP COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		12		2012

Mailing Address 1201 F STREET NW, STE 675

**Transaction ID : SB.51**

City WASHINGTON State DC Zip Code 20004

Amount of Each Disbursement this Period

50000.00
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Purpose of Disbursement  
NON-FEDERAL CONTRIBUTION

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

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

Mailing Address

Amount of Each Disbursement this Period

--

City State Zip Code

Purpose of Disbursement

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

50000.00
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50000.00
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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <b>RICHARD SALES MEDIA LLC</b>		Date MM / DD / YYYY <b>10 / 01 / 2012</b>
Mailing Address <b>9010 S. 10TH ST.</b>		Amount <b>2500.00</b>
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85042</b>	<b>Transaction ID : E.001</b>	
Purpose of Expenditure <b>WEB VIDEO-SEE NOTICE FILED 10/02/12</b>	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: <b>MITT ROMNEY</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>CROSSROADS MEDIA LLC</b>		Date MM / DD / YYYY <b>10 / 02 / 2012</b>
Mailing Address <b>66 CANAL CENTER PLAZA, SUITE 555</b>		Amount <b>9071481.86</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	<b>Transaction ID : E.002</b>	
Purpose of Expenditure <b>TV/MEDIA PLACEMENT-SEE NOTICE FILED 10/03/12</b>	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>9073981.86</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 **10 / 25 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <b>CROSSROADS MEDIA LLC</b>		Date MM / DD / YYYY <b>10 / 02 / 2012</b>
Mailing Address <b>66 CANAL CENTER PLAZA, SUITE 555</b>		Amount <b>1697722.00</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	<b>Transaction ID : E.003</b>	
Purpose of Expenditure TV/MEDIA PLACEMENT-SEE NOTICE FILED 10/03/12	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>MCCARTHY HENNINGS MEDIA INC</b>		Date MM / DD / YYYY <b>10 / 02 / 2012</b>
Mailing Address <b>1850 M ST NW, SUITE 235</b>		Amount <b>62745.04</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20036</b>	<b>Transaction ID : E.004</b>	
Purpose of Expenditure TV/MEDIA PRODUCTION-SEE NOTICE FILED 10/03/12	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>1760467.04</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 **10 / 25 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <b>MENTZER MEDIA SERVICES INC</b>		Date 10 / 02 / 2012
Mailing Address 600 FAIRMONT AVE, SUITE 306		Amount 1972987.84
City TOWSON      State MD      Zip Code 21286	<b>Transaction ID : E.007</b>	
Purpose of Expenditure TV/MEDIA PLACEMENT-SEE AMENDED NOTICE FILED 10/05/12	Category/ Type	Office Sought: <input type="checkbox"/> House      State: FL <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4022606.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>RISING TIDE MEDIA GROUP LLC</b>		Date 10 / 02 / 2012
Mailing Address 226 S. FAYETTE		Amount 15513.00
City ALEXANDRIA      State VA      Zip Code 22314	<b>Transaction ID : E.008</b>	
Purpose of Expenditure TV/MEDIA PRODUCTION-SEE AMENDED NOTICE FILED 10/05/12	Category/ Type	Office Sought: <input type="checkbox"/> House      State: FL <input checked="" type="checkbox"/> Senate      District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4022606.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	1988500.84
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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.

Signature CALEB CROSBY      Date 10 / 25 / 2012

[Electronically Filed]

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <b>RICHARD SALES MEDIA LLC</b>		Date MM / DD / YYYY <b>10 / 03 / 2012</b>
Mailing Address <b>9010 S. 10TH ST.</b>		Amount <b>4000.00</b>
City <b>PHOENIX</b>	State <b>AZ</b>	
Zip Code <b>85042</b>	<b>Transaction ID : E.009</b>	
Purpose of Expenditure <b>WEB VIDEO-SEE NOTICE FILED 10/04/12</b>	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>TARGETED VICTORY</b>		Date MM / DD / YYYY <b>10 / 03 / 2012</b>
Mailing Address <b>P.O. BOX 2187</b>		Amount <b>438600.00</b>
City <b>ARLINGTON</b>	State <b>VA</b>	
Zip Code <b>22202</b>	<b>Transaction ID : E.005</b>	
Purpose of Expenditure <b>WEB ADS-SEE NOTICE FILED 10/03/12</b>	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>442600.00</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 **10 / 25 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00487363</span> </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 <div style="float: right; margin-top: -15px;"> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee <b>BLUEFRONT STRATEGIES LLC</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Y Y Y Y Y Y Y</div>
Mailing Address <b>174 WATERFRONT STREET, STE 500</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">120000.00</div>
City <b>NATIONAL HARBOR</b> State <b>MD</b> Zip Code <b>20745</b>	<b>Transaction ID : E.006</b>	
Purpose of Expenditure <b>WEB ADS-SEE NOTICE FILED 10/03/12</b>	Category/Type <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">56122196.68</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee <b>TARGETED VICTORY</b>		Date <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">M M M /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block; margin-right: 10px;">D D D /</div> <div style="border: 1px solid black; padding: 2px; display: inline-block;">Y Y Y Y Y Y Y</div>
Mailing Address <b>P.O. BOX 2187</b>		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">109650.00</div>
City <b>ARLINGTON</b> State <b>VA</b> Zip Code <b>22202</b>	<b>Transaction ID : E.011</b>	
Purpose of Expenditure <b>WEB ADS-SEE NOTICE FILED 10/03/12</b>	Category/Type <div style="border: 1px solid black; width: 40px; height: 20px; display: inline-block;"></div>	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: <b>MITT ROMNEY</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">56122196.68</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;">229650.00</div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; text-align: right;"> </div>
<b>(c) TOTAL</b> Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; 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.

*CALEB CROSBY*

Signature \_\_\_\_\_ [Electronically Filed]      Date 

M M M /

D D D /

Y Y Y Y Y Y Y

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <b>TARGETED VICTORY</b>		Date MM / DD / YYYY <b>10 / 03 / 2012</b>
Mailing Address P.O. BOX 2187		Amount <b>38000.00</b>
City <b>ARLINGTON</b>	State <b>VA</b>	
Zip Code <b>22202</b>	<b>Transaction ID : E.013</b>	
Purpose of Expenditure <b>WEB ADS-SEE NOTICE FILED 10/10/12</b>	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>CROSSROADS MEDIA LLC</b>		Date MM / DD / YYYY <b>10 / 05 / 2012</b>
Mailing Address 66 CANAL CENTER PLAZA, SUITE 555		Amount <b>5199257.71</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	<b>Transaction ID : E.012</b>	
Purpose of Expenditure <b>REFLECTS MEDIA PLACEMENT CREDIT OF \$34,044. SEE NOTICE FILED 10/10/12</b>	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>5237257.71</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 **10 / 25 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <b>MENTZER MEDIA SERVICES INC</b>		Date 10 / 05 / 2012
Mailing Address 600 FAIRMONT AVE, SUITE 306		Amount 388103.00
City TOWSON      State MD      Zip Code 21286	<b>Transaction ID : E.010</b>	
Purpose of Expenditure TV/MEDIA PLACEMENT-SEE NOTICE FILED 10/09/12	Category/Type	Office Sought: <input type="checkbox"/> House    State: FL <input checked="" type="checkbox"/> Senate    District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 4022606.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee <b>MENTZER MEDIA SERVICES INC</b>		Date 10 / 05 / 2012
Mailing Address 600 FAIRMONT AVE, SUITE 306		Amount 1513899.08
City TOWSON      State MD      Zip Code 21286	<b>Transaction ID : E.016</b>	
Purpose of Expenditure TV/MEDIA PLACEMENT-SEE NOTICE FILED 10/10/12	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 56122196.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	1902002.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>BLUEFRONT STRATEGIES LLC</b>		Date <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 09 / 2012
Mailing Address 174 WATERFRONT STREET, STE 500		Amount <span style="border: 1px solid black; padding: 2px;">120000.00</span>
City NATIONAL HARBOR	State MD	Zip Code 20745
Purpose of Expenditure WEB ADS-SEE NOTICE FILED 10/10/12	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	<b>Transaction ID : E.015</b> Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5 56122196.68</span>		2012

Full Name (Last, First, Middle Initial) of Payee <b>TARGETED VICTORY</b>		Date <span style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</span> 10 / 10 / 2012
Mailing Address P.O. BOX 2187		Amount <span style="border: 1px solid black; padding: 2px;">400600.00</span>
City ARLINGTON	State VA	Zip Code 22202
Purpose of Expenditure WEB ADS-SEE NOTICE FILED 10/10/12	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	<b>Transaction ID : E.014</b> Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">5 56122196.68</span>		2012

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">520600.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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 M M M / D D D / Y Y Y Y Y Y  
10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <b>UPGRADE FILMS</b>		Date MM / DD / YYYY <b>10 / 10 / 2012</b>
Mailing Address <b>3299 K STREET NW, STE 200</b>		Amount <b>24915.09</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20007</b>	<b>Transaction ID : E.017</b>	
Purpose of Expenditure <b>TV/MEDIA PRODUCTION-SEE NOTICE FILED 10/10/12</b>	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>TARGETED VICTORY</b>		Date MM / DD / YYYY <b>10 / 10 / 2012</b>
Mailing Address <b>P.O. BOX 2187</b>		Amount <b>109650.00</b>
City <b>ARLINGTON</b>	State <b>VA</b>	
Zip Code <b>22202</b>	<b>Transaction ID : E.018</b>	
Purpose of Expenditure <b>WEB ADS-SEE NOTICE FILED 10/09/12</b>	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: <b>MITT ROMNEY</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>134565.09</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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  
**10 / 25 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> 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 <b>CROSSROADS MEDIA LLC</b>		Date MM / DD / YYYY <b>10 / 12 / 2012</b>
Mailing Address <b>66 CANAL CENTER PLAZA, SUITE 555</b>		Amount <b>11076633.82</b>
City <b>ALEXANDRIA</b>	State <b>VA</b>	
Zip Code <b>22314</b>	<b>Transaction ID : E.019</b>	
Purpose of Expenditure TV/MEDIA PLACEMENT-SEE NOTICE FILED 10/17/12	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <b>UPGRADE FILMS</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>
Mailing Address <b>3299 K STREET NW, STE 200</b>		Amount <b>53336.48</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20007</b>	<b>Transaction ID : E.020</b>	
Purpose of Expenditure TV/MEDIA PRODUCTION-SEE NOTICE FILED 10/17/12	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: <b>BARACK OBAMA</b>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	<b>11129970.30</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 **10 / 25 / 2012**

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> 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 <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>	

Full Name (Last, First, Middle Initial) of Payee <b>TARGETED VICTORY</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address P.O. BOX 2187		Amount <span style="border: 1px solid black; padding: 2px;">438600.00</span>
City ARLINGTON	State VA	
Zip Code 22202	<b>Transaction ID : E.021</b>	
Purpose of Expenditure WEB ADS-SEE NOTICE FILED 10/17/12	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	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 <span style="border: 1px solid black; padding: 2px;">5 56122196.68</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee <b>BLUEFRONT STRATEGIES LLC</b>		Date <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 10 / 16 / 2012
Mailing Address 174 WATERFRONT STREET, STE 500		Amount <span style="border: 1px solid black; padding: 2px;">120000.00</span>
City NATIONAL HARBOR	State MD	
Zip Code 20745	<b>Transaction ID : E.022</b>	
Purpose of Expenditure WEB ADS-SEE NOTICE FILED 10/17/12	Category/ Type <span style="border: 1px solid black; padding: 2px;"> </span>	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 <span style="border: 1px solid black; padding: 2px;">5 56122196.68</span>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;">558600.00</span>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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 M M / D D / Y Y Y Y Y Y  
10 / 25 / 2012

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Crossroads</b>	<b>FEC IDENTIFICATION NUMBER</b> ▼ <b>C</b> 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 <b>TARGETED VICTORY</b>		Date MM / DD / YYYY <b>10 / 16 / 2012</b>
Mailing Address <b>P.O. BOX 2187</b>		Amount <b>109650.00</b>
City <b>ARLINGTON</b>	State <b>VA</b>	
Zip Code <b>22202</b>	<b>Transaction ID : E.023</b>	
Purpose of Expenditure <b>WEB ADS-SEE NOTICE FILED 10/17/12</b>	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: <b>MITT ROMNEY</b>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <b>56122196.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee		Date MM / DD / YYYY
Mailing Address		Amount
City	State	
Zip Code		
Purpose of Expenditure	Category/Type	Office Sought: <input type="checkbox"/> House    State: _____ <input type="checkbox"/> Senate    District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<b>109650.00</b>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures.....▶	
<b>(c) TOTAL</b> Independent Expenditures.....▶	<b>33087844.92</b>

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  
**10 / 25 / 2012**