

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

New Prosperity Foundation; The

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value=""/>	<input type="text" value="132583.89"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="386281.76"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="414753.44"/>	<input type="text" value="1620637.35"/>
(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="801035.20"/>	<input type="text" value="1753221.24"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="399907.27"/>	<input type="text" value="1352093.31"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="401127.93"/>	<input type="text" value="401127.93"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="5500.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

New Prosperity Foundation; The

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 01 / 2012 To: M M / D D / Y Y Y Y 10 / 17 / 2012

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	414750.00	1620250.00
(ii) Unitemized	0.00	210.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	414750.00	1620460.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	414750.00	1620460.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	150.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3.44	27.35
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))..... ▶	414753.44	1620637.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	414753.44	1620637.35

DETAILED SUMMARY PAGE

of Disbursements

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	-138614.79	304226.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	-138614.79	304226.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	538522.06	1047866.92
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	399907.27	1352093.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	399907.27	1352093.31

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)	414750.00	1620460.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	414750.00	1620460.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	-138614.79	304226.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	-138614.79	304226.39

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

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

FOR LINE NUMBER: PAGE 6 OF 32
(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)
New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)
A. Duncan Alexander
 Mailing Address PO Box 366
 City State Zip Code
 Geneva IL 60134
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 None Retired
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 35000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 10 / 2012
Transaction ID : SA11AI.4885
 Amount of Each Receipt this Period
 15000.00

Full Name (Last, First, Middle Initial)
B. Dean L Buntrock
 Mailing Address 1 Tower Ln
 Ste 2242
 City State Zip Code
 Oakbrook Terrace IL 60181
 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 ▼
 55000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2012
Transaction ID : SA11AI.4891
 Amount of Each Receipt this Period
 5000.00

Full Name (Last, First, Middle Initial)
C. George Cibula
 Mailing Address 970 N Oaklawn Ave
 Ste 100
 City State Zip Code
 Elmhurst IL 60126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Darwin Realty & Development Co Chairman & CEO
 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 / 02 / 2012
Transaction ID : SA11AI.4872
 Amount of Each Receipt this Period
 2000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 22000.00
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 7 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)
A. John Edwardson

Mailing Address 301 Sheridan Rd.

City State Zip Code
 Winnetka IL 60093

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

Name of Employer Occupation
 CDW Chairman

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 / 04 / 2012

Transaction ID : SA11AI.4876

Amount of Each Receipt this Period
 10000.00

Full Name (Last, First, Middle Initial)
B. Gerald R Forsythe

Mailing Address 60101 N Buffalo Grove Rd
 Suite 300

City State Zip Code
 Buffalo Grove IL 60089

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

Name of Employer Occupation
 Indeck Energy Services Inc Chairman & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 60000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 17 / 2012

Transaction ID : SA11AI.4897

Amount of Each Receipt this Period
 50000.00

Full Name (Last, First, Middle Initial)
C. David G Herro

Mailing Address 65 E Goethe

City State Zip Code
 Chicago IL 60610

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

Name of Employer Occupation
 Harris Associates LP Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 225000.00

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

Transaction ID : SA11AI.4879

Amount of Each Receipt this Period
 100000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 160000.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 32
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)
A. Larry Hochberg

Mailing Address 275 N. Deere Park E

City Highland Park State IL Zip Code 60035

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

Name of Employer Next Realty Occupation Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 2500.00

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

Transaction ID : SA11AI.4878

Amount of Each Receipt this Period
 2500.00

Full Name (Last, First, Middle Initial)
B. Indeck Energy Services

Mailing Address 60101 N Buffalo Grove Rd Suite 300

City Buffalo Grove State IL Zip Code 60089

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

Name of Employer Occupation

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 / 17 / 2012

Transaction ID : SA11AI.4899

Amount of Each Receipt this Period
 50000.00

Full Name (Last, First, Middle Initial)
C. Fred A Krehbiel

Mailing Address 505 S County Line Rd

City Hinsdale State IL Zip Code 60521

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

Name of Employer Molex Incorporated Occupation Co-Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 100000.00

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

Transaction ID : SA11AI.4880

Amount of Each Receipt this Period
 50000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 102500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 32
	<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)
New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)
A. Maclean Fogg Company

Mailing Address 1000 Allanson Rd

City Mundelein State IL Zip Code 60060

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

Name of Employer Occupation

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 : SA11AI.4888

Amount of Each Receipt this Period
50000.00

Full Name (Last, First, Middle Initial)
B. Midam Development Group

Mailing Address 2803 Butterfield Rd, Ste 310

City Oak Brook State IL Zip Code 60523

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

Name of Employer Occupation

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 : SA11AI.4895

Amount of Each Receipt this Period
1500.00

Full Name (Last, First, Middle Initial)
C. Chris Reyes

Mailing Address 6250 N River Rd Ste 9000

City Rosemont State IL Zip Code 60018

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

Name of Employer Occupation
 Reyes Holdings Co-Chairman

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 / 04 / 2012

Transaction ID : SA11AI.4874

Amount of Each Receipt this Period
25000.00

SUBTOTAL of Receipts This Page (optional).....	76500.00
TOTAL This Period (last page this line number only).....	

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

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

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

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NAME OF COMMITTEE (In Full)
New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)
A. Scott Stefanik

Mailing Address 1415 W. 22nd St., Tower Level

City State Zip Code
 Oak Brook IL 60523

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

Name of Employer Occupation
 Midwest Commercial Realty Real Estate Brokerage

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 : SA11AI.4887

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
B. John A Stephan

Mailing Address 136 Reef Rd

City State Zip Code
 Palm Beach FL 33480

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

Name of Employer Occupation
 Chicago Board Options Exchange Trader

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 / 10 / 2012
Transaction ID : SA11AI.4882

Amount of Each Receipt this Period
 3000.00

Full Name (Last, First, Middle Initial)
C. Alexander Stuart

Mailing Address 150 Field Drive, Suite 100

City State Zip Code
 Lake Forest IL 60045

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

Name of Employer Occupation
 North Star Investment Inc. President

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 / 15 / 2012
Transaction ID : SA11AI.4890

Amount of Each Receipt this Period
 10000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 13500.00

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 12 OF 32
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
New Prosperity Foundation; The

A. Full Name (Last, First, Middle Initial)
Harry C Walsh

Mailing Address 189 S Oak Park Avenue

City State Zip Code
Oak Park IL 60302

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

Name of Employer Occupation
Remax Real Estate Broker

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 : SA11AI.4903

Amount of Each Receipt this Period
250.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	414750.00

**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)

New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)

A. Chris Dudley

Mailing Address 3000 N Sheridan Rd #18-D

City Chicago State IL Zip Code 60657

Purpose of Disbursement
Communications and Strategic Consulting

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			08			2012			

Transaction ID : SB21B.4905

Amount of Each Disbursement this Period

7	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

B. Holtzman Vogel Josefiak, PLLC

Mailing Address 45 N Hill Dr
Ste 100

City Warrenton State VA Zip Code 20186

Purpose of Disbursement
Legal Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : SB21B.4904

Amount of Each Disbursement this Period

1	0	7	5	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

C. Melange Enterprises Ltd.

Mailing Address 374 E Samuelsen Dr

City Edgerton State WI Zip Code 53534

Purpose of Disbursement
Fundraising Consulting

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			02			2012			

Transaction ID : SB21B.4906

Amount of Each Disbursement this Period

6	0	0	0	0	0	0	0	0	0
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SUBTOTAL of Disbursements This Page (optional)..... ▶

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

1	4	0	7	5	0	0	0	0	0
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1	4	0	7	5	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)

A. Piryx, Inc.

Mailing Address 144 2nd St
FI 1

City San Francisco State CA Zip Code 94105

Purpose of Disbursement
CC Processing

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2012

Transaction ID : SB21B.4907

Amount of Each Disbursement this Period

3057.50

Category/
Type

Full Name (Last, First, Middle Initial)

B. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Debit Pre-Paid IE (IL-8)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2012

Transaction ID : SB21B.4726

Amount of Each Disbursement this Period

-42209.76

Category/
Type

Full Name (Last, First, Middle Initial)

C. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Debit Pre-Paid IE (IL-10)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2012

Transaction ID : SB21B.4728

Amount of Each Disbursement this Period

-29084.07

Category/
Type

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

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

-68236.33

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

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

FOR LINE NUMBER:
(check only one)

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

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)
New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)

A. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Debit Pre-Paid IE (IL-11)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2012

Transaction ID : SB21B.4730

Amount of Each Disbursement this Period

-32110.40

Full Name (Last, First, Middle Initial)

B. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Debit Pre-Paid IE (IL-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 / 01 / 2012

Transaction ID : SB21B.4732

Amount of Each Disbursement this Period

-30111.96

Full Name (Last, First, Middle Initial)

C. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Debit Pre-Paid IE (IL-13)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2012

Transaction ID : SB21B.4734

Amount of Each Disbursement this Period

-32818.22

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

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

-95040.58

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)
New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)

A. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Debit Pre-Paid IE (IL-17)

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2012

Transaction ID : SB21B.4736

Amount of Each Disbursement this Period

-29730.79

Full Name (Last, First, Middle Initial)

B. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Grassroots Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2012

Transaction ID : SB21B.4914

Amount of Each Disbursement this Period

3500.00

Full Name (Last, First, Middle Initial)

C. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Grassroots Consulting

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 10 / 2012

Transaction ID : SB21B.4944

Amount of Each Disbursement this Period

3187.15

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

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

-23043.64

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

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

FOR LINE NUMBER:
(check only one)

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

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)
New Prosperity Foundation; The

Full Name (Last, First, Middle Initial)

A. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Pre-Paid IE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2012

Transaction ID : SB21B.4908

Amount of Each Disbursement this Period

15016.60

Category/
Type

Full Name (Last, First, Middle Initial)

B. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Pre-Paid IE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2012

Transaction ID : SB21B.4909

Amount of Each Disbursement this Period

15014.16

Category/
Type

Full Name (Last, First, Middle Initial)

C. XPS Professional Services

Mailing Address 220 E Adams St
Suite 200

City Springfield State IL Zip Code 62701

Purpose of Disbursement
Polling

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 17 / 2012

Transaction ID : SB21B.4910

Amount of Each Disbursement this Period

3600.00

Category/
Type

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

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

33630.76

-138614.79

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **Transaction ID : SC/10.4446**
New Prosperity Foundation; The

LOAN SOURCE Full Name (Last, First, Middle Initial) Ron Gidwitz	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 200 S Wacker Ste 4000	
City Chicago State IL ZIP Code 60606	

Original Amount of Loan 5500.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 5500.00
------------------------------------	------------------------------------	--

TERMS

Date Incurred: MM / DD / YYYY / / Date Due: MM / DD / YYYY Interest Rate: % (apr) Secured: Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input type="text"/>

SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="5500.00"/>
TOTALS This Period (last page in this line only)..... ▶	<input type="text" value="5500.00"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date 10 / 01 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 42209.76
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4727
Name of Federal Candidate Supported or Opposed by Expenditure: L. TAMMY DUCKWORTH		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
171993.49		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date 10 / 01 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 29084.07
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4729
Name of Federal Candidate Supported or Opposed by Expenditure: BRADLEY SCOTT SCHNEIDER		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
100874.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	71293.83
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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

Gregory Baise
Signature

[Electronically Filed] Date 10 / 23 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date 10 / 01 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 32110.40
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4731
Name of Federal Candidate Supported or Opposed by Expenditure: G. WILLIAM (BILL) FOSTER		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
104211.03		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date 10 / 01 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 30111.96
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4733
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM L JR ENYART		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
90613.96		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	62222.36
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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

Gregory Baise
Signature

[Electronically Filed] Date 10 / 23 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date 10 / 01 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 32818.22
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4735
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MICHAEL GILL		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 93342.22		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date 10 / 01 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 29730.79
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4737
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 91486.54		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	62549.01
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Gregory Baise
Signature

[Electronically Filed] Date 10 / 23 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date 10 / 10 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 42209.76
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4750
Name of Federal Candidate Supported or Opposed by Expenditure: L. TAMMY DUCKWORTH		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
214203.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date 10 / 10 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 29084.07
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4751
Name of Federal Candidate Supported or Opposed by Expenditure: BRADLEY SCOTT SCHNEIDER		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
129958.89		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	71293.83
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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

Gregory Baise
Signature

[Electronically Filed] Date 10 / 23 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 32110.40
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4752
Name of Federal Candidate Supported or Opposed by Expenditure: G. WILLIAM (BILL) FOSTER		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
136321.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 30111.96
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Transaction ID : SE.4753
Name of Federal Candidate Supported or Opposed by Expenditure: BRAD J HARRIMAN		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
120725.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	62222.36
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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

Gregory Baise
Signature

[Electronically Filed] Date **10 / 23 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 32818.22
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID MICHAEL GILL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
126160.44		2012

Transaction ID : SE.4755

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 10 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 29730.79
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Voter Contact Mail	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)
121217.33		2012

Transaction ID : SE.4756

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	62549.01
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Gregory Baise
Signature

[Electronically Filed] Date **10 / 23 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date 10 / 11 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 1400.00
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Door Hangers	Category/ Type	Transaction ID : SE.4764
Name of Federal Candidate Supported or Opposed by Expenditure: L. TAMMY DUCKWORTH		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 215603.25		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date 10 / 11 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 1400.00
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Door-to-Door GOTV (ESTIMATED) See Final Entry Below	Category/ Type	Transaction ID : SE.4765
Name of Federal Candidate Supported or Opposed by Expenditure: L. TAMMY DUCKWORTH		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 215603.25		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	1400.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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

Gregory Baise

Signature

[Electronically Filed]

Date

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
10		23		2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date MM / DD / YYYY 10 / 11 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 3306.35
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Door-to-Door GOTV Originally Reported as Estimate 10/11 for 2,000	Category/Type	Transaction ID : SE.4913
Name of Federal Candidate Supported or Opposed by Expenditure: G. WILLIAM (BILL) FOSTER		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
137721.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 4374.50
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Door-to-Door GOTV (Originally Reported as Estimate of \$14,000 on 10/11)	Category/Type	Transaction ID : SE.4912
Name of Federal Candidate Supported or Opposed by Expenditure: L. TAMMY DUCKWORTH		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
215603.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	7680.85
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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

Gregory Baise
Signature

[Electronically Filed] Date **10 / 23 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ C C00488494
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 XPS Professional Services		Date 10 / 17 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 29992.41
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Advertising - Radio	Category/Type	Transaction ID : SE.4823
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
151209.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services		Date 10 / 17 / 2012
Mailing Address 220 E Adams St Suite 200		Amount 500.00
City Springfield	State IL	Zip Code 62701
Purpose of Expenditure Advertising - Radio Production	Category/Type	Transaction ID : SE.4824
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
151709.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	30492.41
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	

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

Gregory Baise
Signature

[Electronically Filed] Date 10 / 23 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) New Prosperity Foundation; The	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00488494 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services	Date <div style="border: 1px solid black; padding: 2px;"> 10 / 17 / 2012 </div>		
Mailing Address 220 E Adams St Suite 200	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 10000.00 </div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Springfield</td> <td style="width:33%;">State IL</td> <td style="width:33%;">Zip Code 62701</td> </tr> </table>		City Springfield	State IL
City Springfield	State IL	Zip Code 62701	
Purpose of Expenditure Voter Telephone Contact	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 11 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: G. WILLIAM (BILL) FOSTER		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; text-align: right;"> 147721.43 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : SE.4836

Full Name (Last, First, Middle Initial) of Payee XPS Professional Services	Date <div style="border: 1px solid black; padding: 2px;"> 10 / 17 / 2012 </div>		
Mailing Address 220 E Adams St Suite 200	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 10000.00 </div>		
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Springfield</td> <td style="width:33%;">State IL</td> <td style="width:33%;">Zip Code 62701</td> </tr> </table>		City Springfield	State IL
City Springfield	State IL	Zip Code 62701	
Purpose of Expenditure Voter Telephone Contact	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: WILLIAM L JR ENYART		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; text-align: right;"> 130725.92 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : SE.4837

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 20000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Gregory Baise

[Electronically Filed]

Date

10 / 23 / 2012

Signature

