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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation Americans for Prosperity		
(b) Address (number and street) check if different than previously reported 1310 North Courthouse Rd		
Suite 700		
(c) City, State and ZIP Code	3. FEC Identification Number	
ARLINGTON VA 22201		
2. Occupation and Name of Employer (for Individual Filers Only)	C C90013285	
4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report		
July 15 Quarterly Report 24-Hour Report		
October 15 Quarterly Report 48-Hour Report		
January 31 Year-End Report		
b) Is this Report an amendment? 🗷 No 🗌 Yes, it amends the report filed on	M / D D / Y Y Y Y Y	
5. COVERING PERIOD: FROM 08 / 29 / 2018 THROUGH 08 / 29 / 2018		
6. TOTAL CONTRIBUTIONS	0.00	
7. TOTAL INDEPENDENT EXPENDITURES	2044159.00	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, of, any candidate or authorized committee or agent of either, or any political party committee or its agent.	or concert with, or at the request or suggestion	
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE [Ele	DATE ctronically Filed]	
Castellaw, Gary, , , Treasurer Castellaw, Gary, , , Treasurer Castellaw, Gary, , , Treasurer	08/31/2018	
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. §437g.		

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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AME OF FILER (In Full) Americans for Prosperity		
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
IN PURSUIT OF	M M / D D / Y Y Y Y Y	
Mailing Address 2300 WILSON BLVD.	08 29 2018	
5TH FLOOR	Amount	
City State Zip Code	2044159.00	
ARLINGTON VA 22201	Transaction ID : SE24.63	
Purpose of Expenditure AD PRODUCTION AND PLACEMENT - "WE PAID THE BILL" Category/ Type 004	Office Sought: House State: TN Senate District	
Name of Federal Candidate Supported or Opposed by Expenditure: BREDESEN, PHIL , , ,	President Check One: Support District: President Oppose	
Calendar Year-To-Date Per Election for Office Sought 2058506.66	Disbursement For: Primary General 2018 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination	
Mailing Address	M = M / D = D / Y = Y = Y	
	Amount	
City State Zip Code		
Purpose of Expenditure Category/	Office Sought: House State:	
Type	Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	First, Middle Initial) of Payee Date of Public Distribution/Dissemination	
AA-Y	M = M / D = D / Y = Y = Y	
Mailing Address		
	Amount	
City State Zip Code		
Purpose of Expenditure Category/ Type	Office Sought: House State:	
Name of Federal Candidate Supported or Opposed by Expenditure:	District:	
11 11 11 11 11 11 11 11 11 11 11 11 11	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	2044159.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	2044159.00	