

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation AMERICANS FOR PROSPERITY		
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1310 N. COURTHOUSE RD. STE. 700		
(c) City, State and ZIP Code ARLINGTON VA 22201		3. FEC Identification Number C C90013285
2. Occupation and Name of Employer (for Individual Filers Only)		

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

MM / DD / YYYY
09 / 21 / 2016

5. COVERING PERIOD:

FROM MM / DD / YYYY
THROUGH MM / DD / YYYY

6. TOTAL CONTRIBUTIONS..... .00

7. TOTAL INDEPENDENT EXPENDITURES 126500.69

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 any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

[Electronically Filed]

Carnahan, Tim, , ,

Carnahan, Tim, , ,

06/29/2017

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 EXPENDITURESPAGE 2 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

AMERICANS FOR PROSPERITY

Full Name (Last, First, Middle Initial) of Payee

Ajilon Professional Staffing

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 21 / 2016

Mailing Address Dept CH 14031

Amount

444.10

City State Zip Code
Palatine IL 60055

Transaction ID : F57.000001

Purpose of Expenditure
Phone BankingCategory/
Type 004Office Sought: ☐ House State: VA
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Kander, Jason, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 458623.89Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

AMERICANS FOR PROSPERITY

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 19 / 2016Mailing Address 1310 N. COURTHOUSE RD.
STE. 700

Amount

22610.30

City State Zip Code
ARLINGTON VA 22201

Transaction ID : F57.000002

Purpose of Expenditure
Staff SalariesCategory/
Type 001Office Sought: ☐ House State: VA
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Kander, Jason, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 356459.82Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

AMERICANS FOR PROSPERITY

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 19 / 2016Mailing Address 1310 N. COURTHOUSE RD.
STE. 700

Amount

11874.19

City State Zip Code
ARLINGTON VA 22201

Transaction ID : F57.000003

Purpose of Expenditure
Canvassing ExpensesCategory/
Type 001Office Sought: ☐ House State: MO
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Kander, Jason, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 368334.01Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 34928.59

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures.....▶
(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 3
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

AMERICANS FOR PROSPERITY

Full Name (Last, First, Middle Initial) of Payee

Cornerstone Staffing

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 21 / 2016

Mailing Address PO Box 909

Amount

1726.32

Transaction ID : F57.000004

Purpose of Expenditure
Phone BankingCategory/
Type 004Office Sought: ☐ House State: MO
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Kander, Jason, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

460350.21

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

The Singularis Group

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 21 / 2016

Mailing Address PO BOX 9265

Amount

23190.00

Transaction ID : F57.000005

Purpose of Expenditure
Mailers ("Kander Healthcare and ObamaCare")Category/
Type 004Office Sought: ☐ House State: MO
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Kander, Jason, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

391524.01

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

United States Postal Service

Date of Public Distribution/Dissemination

MM / DD / YYYY
09 / 21 / 2016

Mailing Address 475 L'Enfant Plaza SW

Amount

66655.78

Transaction ID : F57.000006

Purpose of Expenditure
Postage for Mailers ("Kander Healthcare and Obamacare")Category/
Type 004Office Sought: ☐ House State: MO
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Kander, Jason, , ,Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

458179.79

Disbursement For: ☐ Primary ☒ General
2016
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 91572.10

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 126500.69
(carry total from last page forward to Line 7)