

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation AMERICANS FOR PROSPERITY		3. FEC Identification Number C C90013285
(b) Address (number and street) ☐ check if different than previously reported 2111 WILSON BLVD SUITE 350		
(c) City, State and ZIP Code ARLINGTON VA 22201		
2. Occupation and Name of Employer (for Individual Filers Only)		

MM / DD / YYYY

6. TOTAL CONTRIBUTIONS.....	.00
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7. TOTAL INDEPENDENT EXPENDITURES	15786.00
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10/18/2014

FEC Schedule 5 (REV. 09/2013)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 2 OF 2
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

AMERICANS FOR PROSPERITY

Full Name (Last, First, Middle Initial) of Payee
Americans for Prosperity

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Mailing Address 2111 Wilson Blvd., Suite 350

Amount

City State Zip Code
Arlington VA 22201

13750.80

Transaction ID : F57.000001

Purpose of Expenditure
staff salaryCategory/
Type 001Office Sought: ☐ House State: IA
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Bruce BraleyCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 218666.57Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee
Americans for Prosperity

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y
10 / 17 / 2014

Mailing Address 2111 Wilson Blvd., Suite 350

Amount

City State Zip Code
Arlington VA 22201

2035.20

Transaction ID : F57.000002

Purpose of Expenditure
canvassing expensesCategory/
Type 001Office Sought: ☐ House State: IA
☒ Senate District: _____
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Bruce BraleyCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought 220701.77Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

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

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y

Mailing Address

Amount

City State Zip Code

Purpose of Expenditure

Category/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 15786.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 15786.00
(carry total from last page forward to Line 7)