06/19/2017 21 : 18

PAGE 1/2

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

	, , ,		7	
	f Individual, Organization or Corporation NS FOR PROSPERITY			
	c (number and street) check if different than previous Rd	ously reported		
(c) City, Sta	te and ZIP Code	O FFO Identification Number		
ARLINGTON VA 22201		VA 22201	3. FEC Identification Number	
Occupation and Name of Employer (for Individual Filers Only) C C90013285				
	January 31 Year-End Report	24-Hour Report 48-Hour Report es, it amends the report filed on 1	10 / 14 / 2016	
	OTAL CONTRIBUTIONS		938.59	
	perjury I certify that the independent expenditures reported herein we or authorized committee or agent of either, or any political party		, or concert with, or at the request or suggestion	
TYPE OR PRIN	NT NAME OF PERSON COMPLETING FORM	SIGNATURE [Ele	DATE ectronically Filed]	
Carnahan, Tim, , ,		Carnahan, Tim, , ,	01/24/2017	
NC	OTE: Submission of false, erroneous or incomplete information m	ay subject the person signing this report to	the penalties of 2 U.S.C. §437g.	

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 2 FOR LINE 7 OF FORM 5

AME OF FILER (In Full) AMERICANS FOR PROSPERITY				
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination			
Ajilon Professional Staffing		09 10 / Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y		
Mailing Address Dept CH 14031		09 10 2016		
		Amount		
'	ate Zip Code L 60055	123.33 Transaction ID : F57.5754		
Purpose of Expenditure Phone Banking	Category/ Type 004	Office Sought: House State: PA Senate District:		
Name of Federal Candidate Supported or Opposed by MCGINTY, KATHLEEN ALANA, , ,	Check One: District: President Support Oppose			
Calendar Year-To-Date Per Election for Office Sought	380559.03	Disbursement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination			
Cornerstone Staffing Mailing Address PO Box 909		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
- FO BOX 909		Amount		
City	ate Zip Code	815.26		
Grapevine T	X 76099	Transaction ID : F57.5092		
Purpose of Expenditure Phone Banking	Category/ Type 004	Office Sought: House State: PA Senate		
Name of Federal Candidate Supported or Opposed by MCGINTY, KATHLEEN ALANA, , ,	President District: Check One: Support X Oppose			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) of Payee	Date of Public Distribution/Dissemination			
Mailing Address		M M / D D / Y Y Y Y		
maining / tadicoo		Amount		
City St.	ate Zip Code			
Purpose of Expenditure	Category/ Type	Office Sought: House State:		
Name of Federal Candidate Supported or Opposed by		Senate District:		
Traine of Federal Candidate Supported of Opposed by	Expenditure.	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				
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)	938.59			