

# 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<br><b>AMERICANS FOR PROSPERITY</b>                                          |  | 3. FEC Identification Number<br><b>C</b> C90013285 |
| (b) Address (number and street) <input type="checkbox"/> check if different than previously reported<br>2111 WILSON BLVD SUITE 350 |  |                                                    |
| (c) City, State and ZIP Code<br>ARLINGTON VA 22201                                                                                 |  |                                                    |
| 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  
10 / 18 / 2014

5. COVERING PERIOD:

FROM

MM / DD / YYYY  
10 / 17 / 2014

THROUGH

MM / DD / YYYY  
11 / 04 / 2014

6. TOTAL CONTRIBUTIONS.....

00000000.00

7. TOTAL INDEPENDENT EXPENDITURES .....

3900.71

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

Victor Bernson

SIGNATURE

Victor Bernson

DATE

[Electronically Filed]

01/31/2015

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**PAGE 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

Twitter, Inc.

Date of Public Distribution/Dissemination

|     |   |     |   |         |
|-----|---|-----|---|---------|
| M M | / | D D | / | Y Y Y Y |
| 10  |   | 17  |   | 2014    |

Mailing Address 1355 Market Street

Suite 900

Amount

3782.57

City

State

Zip Code

San Francisco

CA

94103

Transaction ID : F57.000001

Purpose of Expenditure  
web ad placement ("Fire Udall 2")Category/  
Type 004
 Office Sought: ☐ House State: CO  
☒ Senate District: \_\_\_\_\_  
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark UdallCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election  
for Office Sought

204143.62

 Disbursement 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 |
| 10  |   | 17  |   | 2014    |

Mailing Address 2111 Wilson Blvd., Suite 350

Amount

118.14

City

State

Zip Code

Arlington

VA

22201

Transaction ID : F57.000002

Purpose of Expenditure  
staff salaryCategory/  
Type 001
 Office Sought: ☐ House State: CO  
☒ Senate District: \_\_\_\_\_  
☐ President
Name of Federal Candidate Supported or Opposed by Expenditure:  
Mark UdallCheck One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election  
for Office Sought

204261.76

 Disbursement 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 |
|     |   |     |   |         |

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/  
Type
 Office 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 Sought
 Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 3900.71

(b) SUBTOTAL of Unitemized Independent Expenditures .....▶

(c) TOTAL Independent Expenditures.....▶ 3900.71  
(carry total from last page forward to Line 7)