

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		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)		

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

/ /

5. COVERING PERIOD:

FROM

/ /

THROUGH

/ /

6. TOTAL CONTRIBUTIONS.....

.00

7. TOTAL INDEPENDENT EXPENDITURES

1372.80

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]

10/31/2014

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
Cornerstone Staffing

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 30 / 2014

Mailing Address 5080 Spectrum Drive, #100W

Amount

City State Zip Code
Addison TX 75001

Amount
1372.80

Transaction ID : F57.000001

Purpose of Expenditure
phone banking

Category/
Type 004

Office Sought: ☒ House State: AZ
☐ Senate District: 02
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:
Ron Barber

Check One: ☐ Support ☒ Oppose

Calendar Year-To-Date Per Election
for Office Sought 36341.48

Disbursement For: ☐ Primary ☒ General
2014
☐ Other (specify) ▶

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

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Amount

Purpose of Expenditure

Category/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

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

Date of Public Distribution/Dissemination

MM / DD / YYYY

Mailing Address

Amount

City State Zip Code

Amount

Purpose of Expenditure

Category/
Type

Office Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

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) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶ 1372.80

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

(c) **TOTAL** Independent Expenditures.....▶ 1372.80
(carry total from last page forward to Line 7)