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FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

(a) Name of Individual, Organization or Corporation AMERICANS FOR PROSPERITY		
(b) Address (number and street) check if different than previously reported 1310 N Courthouse Rd Ste 700		
(c) City, State and ZIP Code	3. FEC Identification Number	
ARLINGTON VA 22201	S. T. E. Tachtimodilett Walliper	
O Convention and Name of Franks on (for Individual Filera Only)	C C90013285	
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 X Yes, it amends the report filed on 09 02 2016		
5. COVERING PERIOD: FROM FROM		
THROUGH M / D D / Y Y Y Y		
6. TOTAL CONTRIBUTIONS	0.00	
7. TOTAL INDEPENDENT EXPENDITURES	118160.38	
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 [Elec	DATE ctronically Filed]	
Carnahan, Tim, , , Carnahan, Tim, , ,	10/14/2016	
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 3 FOR LINE 7 OF FORM 5

NAME OF FILER (In Full) AMERICANS FOR PROSPERITY Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination AMERICANS FOR PROSPERITY 08 31 2016 Mailing Address 1310 N Courthouse Rd Amount Ste 700 Zip Code City State 1972.71 **ARLINGTON** VA 22201 Transaction ID: F57.4968 MO Purpose of Expenditure Office Sought: House Category/ State: 001 Staff Salaries Type X Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: KANDER, JASON, . . **X** Oppose Check One: Support Disbursement For: Primary ✗ General Calendar Year-To-Date Per Election 1972.71 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination AMERICANS FOR PROSPERITY 80 31 2016 Mailing Address 1310 N Courthouse Rd Amount Ste 700 City State Zip Code 326.00 ARLINGTON VA22201 Transaction ID: F57.4969 MO Purpose of Expenditure Office Sought: House Category/ State: 001 Canvassing Expenses Type Senate District:. President Name of Federal Candidate Supported or Opposed by Expenditure: KANDER, JASON, , , Support Check One: **X** Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2298.71 2016 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination The Singularis Group 2016 09 02 Mailing Address P.O. Box 9265 Amount State Zip Code City 29828.10 KS 66201 Shawnee Mission Transaction ID: F57.4970 Purpose of Expenditure MO Office Sought: House Category/ State: 004 Mailer (Kander Obamacare) Type X Senate District: President Name of Federal Candidate Supported or Opposed by Expenditure: KANDER, JASON, , , Support **X** Oppose Check One: Disbursement For: 2016 Primary General Calendar Year-To-Date Per Election 32126.81 for Office Sought Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures..... 32126.81 (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 3 OF 3 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	
United States Postal Service	09 02 2016	
Mailing Address 475 L'Enfant Plaza Sw	09 02 2010	
Amount		
City State Zip Code	86033.57	
Washington DC 20260	Transaction ID : F57.4971	
Purpose of Expenditure Postage for Mailer (Kander Obamacare) Category/ Type 004	Office Sought: House State: MO Senate	
Name of Federal Candidate Supported or Opposed by Expenditure:	District:	
KANDER, JASON, , ,	Check One: Support Coppose	
Calendar Year-To-Date Per Election	Disbursement For: Primary 🗶 General	
for Office Sought	2016 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination		
	M = M / D = D / Y = Y = Y	
Mailing Address		
	Amount	
City State Zip Code		
Purpose of Expenditure Category/ Type	Office Sought: House State:	
	Senate President District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose	
Calendar Year-To-Date Per Election Disbursement For: Primary General		
for Office Sought Other (specify)		
Full Name (Last, First, Middle Initial) of Payee Date of Public Distribution/Dissemination		
	M = M / D = D / Y = Y = Y	
Mailing Address		
	Amount	
City State Zip Code		
Purpose of Expenditure Category/	Office Sought: House State:	
Туре	Senate District:	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
	Check One: Support Oppose	
Calendar Year-To-Date Per Election	Disbursement For: Primary General	
for Office Sought	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		
86033.57		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	118160.38	