06/17/2017 08 : 08

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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 p 1310 N Courthouse Rd Ste 700	reviously reported	
(c) City, State and ZIP Code		2 FFC Identification Number
ARLINGTON	VA 22201	3. FEC Identification Number
2. Occupation and Name of Employer (for Individual Filers Only)		C C90013285
4. TYPE OF REPORT (check appropriate boxes):  (a) April 15 Quarterly Report		
July 15 Quarterly Report	24-Hour Report	
October 15 Quarterly Report	<b>¥</b> 48-Hour Report	
January 31 Year-End Report		
b) Is this Report an amendment? No	Yes, it amends the report filed on	10 / 14 / 2016
5. COVERING PERIOD:  FROM  THROUGH  THROUGH	D / Y Y Y Y Y	
TOTAL CONTRIBUTIONS      TOTAL INDEPENDENT EXPENDITURES		0.00
Under penalty of perjury I certify that the independent expenditures reported her of, any candidate or authorized committee or agent of either, or any political p		ion, or concert with, or at the request or suggestion
TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE Electronically Filed]
Carnahan, Tim, , ,	Carnahan, Tim, , ,	01/24/2017
NOTE: Submission of false, erroneous or incomplete information	on may subject the person signing this repor	rt to the penalties of 2 U.S.C. §437g.

For further information, contact: Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

PAGE 2 OF 3 FOR LINE 7 OF FORM 5

Full Name (Last, First, Middle Initial) of Payee Ajlian Professional Staffing Mailing Address Dept CH 14031  City State Uniform It Doubte of Public Distribution/Dissemination  Amount  Amount  Transaction ID: F57.5381  Project of Expenditure Phone Banking Mailing Address PO Box 909  City State Transaction ID: F57.5382  Disbursement For: Support IX Oppose  Corier Mestor, Catherine, Transaction ID: F57.5382  Disbursement For: Support IX Oppose  Disbursement For: Support IX Oppose  Corier Mestor, Catherine, Transaction ID: F57.5382  Disbursement For: Support IX Oppose  Orier (specify)  Amount  City State Transaction ID: F57.5382  Disbursement For: Support IX Oppose  Orier Sought Transaction ID: F57.5382  Disbursement For: Support IX Oppose  Orier Sought Transaction ID: F57.5382  Orier (specify) Transaction ID: F57.5382	IAME OF FILER (In Full) AMERICANS FOR PROSPERITY				
Ajlion Professional Staffing  Mailing Address Dept CH 14031  City State Zip Code Palatine IL 60055  Furpose of Expenditure Phone Banking Category/ Phone Banking Category/ Odd Calendar Year-To-Date Per Election for Office Sought TX 76099  Full Name (Last, First, Middle Initial) of Payee Cortex Masio, Catherine.  Calendar Year-To-Date Per Election for Office Sought TX 76099  Purpose of Expenditure Prisance Category/ Vipo Cod Discussement For: Primary X General Category/ Professional Staffing Category/ Vipo Cod Discussement For: Primary X General Category/ Catego	AMERICANS FOR PROSPERITY				
Ajlion Professional Staffing  Mailing Address Dept CH 14031  City State Zip Code Palatine IL 60055  Furpose of Expenditure Phone Banking Category/ Phone Banking Category/ Odd Calendar Year-To-Date Per Election for Office Sought TX 76099  Full Name (Last, First, Middle Initial) of Payee Cortex Masio, Catherine.  Calendar Year-To-Date Per Election for Office Sought TX 76099  Purpose of Expenditure Prisance Category/ Vipo Cod Discussement For: Primary X General Category/ Professional Staffing Category/ Vipo Cod Discussement For: Primary X General Category/ Catego					
Theiling Address Dept CH 14031  City State Zip Code IL 60055		Э		Date of Public Distribution/Dissemination	
City   State   Zip Code   IL   60035   Transaction ID: F57.5381   97.80	,				
Palatine IL 60055 Transaction D: F57.5381  Purpose of Expenditure Phone Banking Oscillation of Pages of Expenditure Phone Banking Oscillation of Paderal Candidate Supported or Opposed by Expenditure:  Category Oscillation Office Sought Offi	Dept CH 14031			Amount	
Palatine IL 60055 Transaction D: F57.5381  Purpose of Expenditure Phone Banking Oscillation of Pages of Expenditure Phone Banking Oscillation of Paderal Candidate Supported or Opposed by Expenditure:  Category Oscillation Office Sought Offi	City	State	Zin Code		
Proper Banking   Type   W   Senate   District:   President   Pre			·		
Name of Federal Candidate Supported or Opposed by Expenditure:   Check One:   Support   X   Oppose					
Cortez Masto, Catherine,	Name of Followski Oscalidate Oscarstal as Osc	and the Francisco		District:	
Full Name (Last, First, Middle Initial) of Payee Cornerstone Staffing  Mailing Address PO Box 909  City State Zip Code Grapevine TX 76099 Tanasaction ID: F57.5382  Purpose of Expenditure Phone Banking Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine  Calendar Year-To-Date Per Election for Office Sought  Mailing Address  4250 Highway 22 Suite 7  City State Zip Code President District:  Category/ Type 004  Disbursement For: Primary General Corter (specify)  Date of Public Distribution/Dissemination  Office Sought:  House State: NV President District:  President Cortex Masto, Catherine  Check One: Support Office Sought  Full Name (Last, First, Middle Initial) of Payee Innovative Advertising  Mailing Address  4250 Highway 22 Suite 7  City State Zip Code Mandeville LA 70471  Transaction ID: F57.5379  Date of Public Distribution/Dissemination  Transaction ID: F57.5379  Office Sought:  House State: NV Transaction ID: F57.5379  Office Sought:  Full Name (Last, First, Middle Initial) of Payee Innovative Advertising  Mailing Address  4250 Highway 22 Suite 7  City State Zip Code Mandeville LA 70471  Transaction ID: F57.5379  Office Sought:  House State: NV Transaction ID: F57.5379  Transaction ID: F57.5379  District:  President  Transaction ID: F57.5379  Transaction ID: F57.5379  District:  President  Transaction ID: F57.5379  District:  Check One: Support X Oppose  District:  Check One: Support X Oppose  Calendar Year-To-Date Per Election for Office Sought  Toffice Sought  Transaction ID: F57.5379  District:  Check One: Support X Oppose  Office Sought  Transaction ID: F57.5379  Transaction ID: F		posea by Expena	iture:		
Full Name (Last, First, Middle Initial) of Payee Cornerstone Staffing  Mailing Address PO Box 909  City State Zip Code Grapevine TX 76099 Tanasaction ID: F57.5382  Purpose of Expenditure Phone Banking Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine  Calendar Year-To-Date Per Election for Office Sought  Mailing Address  4250 Highway 22 Suite 7  City State Zip Code President District:  Category/ Type 004  Disbursement For: Primary General Corter (specify)  Date of Public Distribution/Dissemination  Office Sought:  House State: NV President District:  President Cortex Masto, Catherine  Check One: Support Office Sought  Full Name (Last, First, Middle Initial) of Payee Innovative Advertising  Mailing Address  4250 Highway 22 Suite 7  City State Zip Code Mandeville LA 70471  Transaction ID: F57.5379  Date of Public Distribution/Dissemination  Transaction ID: F57.5379  Office Sought:  House State: NV Transaction ID: F57.5379  Office Sought:  Full Name (Last, First, Middle Initial) of Payee Innovative Advertising  Mailing Address  4250 Highway 22 Suite 7  City State Zip Code Mandeville LA 70471  Transaction ID: F57.5379  Office Sought:  House State: NV Transaction ID: F57.5379  Transaction ID: F57.5379  District:  President  Transaction ID: F57.5379  Transaction ID: F57.5379  District:  President  Transaction ID: F57.5379  District:  Check One: Support X Oppose  District:  Check One: Support X Oppose  Calendar Year-To-Date Per Election for Office Sought  Toffice Sought  Transaction ID: F57.5379  District:  Check One: Support X Oppose  Office Sought  Transaction ID: F57.5379  Transaction ID: F	Onless de la Viena Te Data De la Floritica			Disbursement For: Primary General	
Cornerstone Staffing  Mailing Address PO Box 909  City State Zip Code Grapevine TX 76099  Purpose of Expenditure Phone Banking  Name of Federal Candidate Supported or Opposed by Expenditure:  Cortez Masto, Catherine,			178938.30	2016	
Mailing Address PO Box 909  City State Zip Code TX 76099 Transaction ID : F57.5382  Purpose of Expenditure Phone Banking Category/ Type 004 President Cortex Masto, Catherine,	Full Name (Last, First, Middle Initial) of Payer	9		Date of Public Distribution/Dissemination	
Amount  City State Zip Code TX 76099  Purpose of Expenditure Phone Banking  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine,	Cornerstone Staffing			M = M / D = D / Y = Y = Y	
City State Zip Code TX 76099 Transaction ID : F57.5382  Purpose of Expenditure Phone Banking Category' Type 004	Mailing Address PO Box 909			09 27 2016	
Grapevine TX 76099 Transaction ID : F57.5382  Purpose of Expenditure Phone Banking Category/ Type 004 Office Sought: House State: NV Senate President Cortez Masto, Catherine,	1 O Box 500			Amount	
Purpose of Expenditure Phone Banking  Name of Federal Candidate Supported or Opposed by Expenditure:  Cortez Masto, Catherine,  Category/ Type	City	State	Zip Code	668.73	
Phone Banking    Name of Federal Candidate Supported or Opposed by Expenditure:   Check One:   Support   Moppose	Grapevine	TX	76099	Transaction ID : F57.5382	
Name of Federal Candidate Supported or Opposed by Expenditure:  Cortez Masto, Catherine, , , Category/ Marling Address  Amount  City  Suite 7  City  State  LA  70471  Transaction ID: F57.5379  Purpose of Expenditure Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure:  Cortez Masto, Catherine, , , Category/ Cortex Masto, Catherine, , Category/ Cortex Masto,				State:	
Cortez Masto, Catherine, , , Calendar Year-To-Date Per Election for Office Sought  Full Name (Last, First, Middle Initial) of Payee Innovative Advertising  Mailing Address  4250 Highway 22  Suite 7  City  State  LA  70471  Purpose of Expenditure Mailer (Masto Healthcare Mailer 1)  Name of Federal Candidate Supported or Opposed by Expenditure:  Cortez Masto, Catherine, , , Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Anount  Category/ Type  Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  Anount  City  State  Zip Code  Transaction ID: F57.5379  Office Sought:  House  State: NV  Senate  President  Check One:  Support  Check One:  Check On		speed by Evpend		District:	
Full Name (Last, First, Middle Initial) of Payee Innovative Advertising  Mailing Address 4250 Highway 22 Suite 7  City State LA 70471  Purpose of Expenditure Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine, , ,  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.  To Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  Date of Public Distribution/Dissemination  Amount  Category/ Type 004  Office Sought: House State: NV Senate District: President Check One: Support  Other (specify)  Other (specify)  Amount  Transaction ID: F57.5379  Category/ Type 004  Disbursement For: Primary 2016 Other (specify)  Other (specify)		роѕей ву Ехрепа	nure.		
Full Name (Last, First, Middle Initial) of Payee Innovative Advertising  Mailing Address 4250 Highway 22 Suite 7  City State Zip Code Mandeville LA 70471  Purpose of Expenditure Mailer (Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine,  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.  Other (specify)  Date of Public Distribution/Dissemination  Amount  Office Sought Office Sought  Office Sought Office Sought  District: President Check One: Support X Oppose  Disbursement For: Primary General Other (specify)  Other (specify)	Calendar Year-To-Date Per Election		170607.02	Disbursement For: Primary General	
Innovative Advertising  Mailing Address  4250 Highway 22 Suite 7  City State Zip Code Mandeville LA 70471  Purpose of Expenditure Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine, , ,  Category/ Type  O04  Office Sought: House State: NV Senate District: President Check One: Support  Calendar Year-To-Date Per Election for Office Sought  167198.15  Disbursement For: Primary 2016 Other (specify)  Other (specify)	for Office Sought	7	179007.03	Other (specify)	
Mailing Address 4250 Highway 22 Suite 7  City State LA 70471  Purpose of Expenditure Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine, , ,  Category/ Type  Odd  Office Sought: House State: NV X Senate President Check One: Support  Calendar Year-To-Date Per Election for Office Sought  Disbursement For: 2016 Other (specify)  Other (specify)  Other (specify)	Full Name (Last, First, Middle Initial) of Payer	Э		Date of Public Distribution/Dissemination	
Mailing Address 4250 Highway 22 Suite 7  City State Zip Code Mandeville LA 70471  Purpose of Expenditure Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine, , ,  Category/ Type 004  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine, , ,  Category/ Type 004  Category/ Type 004  Category/ Type 004  Coffice Sought: House State: NV Senate District: President Check One: Support X Oppose  Calendar Year-To-Date Per Election for Office Sought 167198.15  Category/ Type 004  Category/ Type 004  Check One: Support X Oppose  Calendar Year-To-Date Per Election for Office Sought 167198.15  Check One: Other (specify)  Transaction ID: F57.5379  Check One: Office Sought 167198.15					
City State Zip Code  Mandeville LA 70471  Purpose of Expenditure Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine, , ,  Category/ Type 004  Category/ Type 004  Check One: Support X Oppose  Calendar Year-To-Date Per Election for Office Sought  Category/ Type 004  Disbursement For: Primary Qeneral Other (specify)  Other (specify)  10541.53	Mailing Address 4250 Highway 22				
Mandeville  LA 70471  Transaction ID: F57.5379  Purpose of Expenditure Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine, , ,  Calendar Year-To-Date Per Election for Office Sought  Disbursement For: Primary 2016  Office Sought  Check One: Support   Disbursement For: Primary 2016  Other (specify)  Other (specify)	Suite 7			Amount	
Purpose of Expenditure Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure: Cortez Masto, Catherine, , ,  Category/ Type  Office Sought:  House State: NV Senate President Check One:  Calendar Year-To-Date Per Election for Office Sought  Disbursement For: 2016 Office Sought  A Oppose  Transaction ID: F57.5379  Office Sought:  NV Senate President Check One:  Other (specify)  Other (specify)  10541.53	*		•	9775.00	
Mailer ('Masto Healthcare Mailer 1')  Name of Federal Candidate Supported or Opposed by Expenditure:  Cortez Masto, Catherine, , ,  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.	Mandeville	LA	70471	Transaction ID : F57.5379	
Name of Federal Candidate Supported or Opposed by Expenditure:  Cortez Masto, Catherine, , ,  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Disbursement For:  2016  Other (specify)  10541.53				State.	
Cortez Masto, Catherine, , ,  Check One: Support X Oppose  Calendar Year-To-Date Per Election for Office Sought  Calendar Year-To-Date Per Election for Office Sought  Check One: Support X Oppose  Disbursement For: Primary 2016  Other (specify)  10541.53	Name of Fortrard Constitute Consented as Con-	and the Francis		District:	
Calendar Year-To-Date Per Election for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures.  Disbursement For: Primary 2016 Other (specify)  167198.15  Disbursement For: Primary 2016 Other (specify)		posed by Expend	iture:		
for Office Sought  (a) SUBTOTAL of Itemized Independent Expenditures				The state of the s	
10041.33			167198.15	2016	
10041.33					
(b) SUBTOTAL of Unitemized Independent Expenditures	(a) SUBTOTAL of Itemized Independent Expe	nditures		10541.53	
(b) SOBTOTAL OF STREETILZED ITTREPERIORIE EXPERIORIES	(h) SURTOTAL of Unitermized Independent Ev	nenditures			
	(b) SOBTOTAL OF OTHER HIZER TRUE PERGERICEN	.penunures			
(c) TOTAL Independent Expenditures					

## 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		M = M / D = D / Y = Y = Y		
Mailing Address 475 L'Enfant Plaza Sw		09 26 2016		
		Amount		
City Washington	State Zip Code DC 20260	11642.35 Transaction ID : F57.5380		
Purpose of Expenditure Postage for Mailer ('Masto Healthcare Mailer 1')	Category/ Type 004	Office Sought: House State: NV		
Name of Federal Candidate Supported or Opposed Cortez Masto, Catherine, , ,	by Expenditure:	Check One: District:  District:  President  X Oppose		
Calendar Year-To-Date Per Election for Office Sought	178840.50	Disbursement For: Primary General 2016 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 Address		Amount		
City	State Zip Code			
Purpose of Expenditure	Category/ Type	Office Sought: House State:		
Name of Federal Candidate Supported or Opposed by Expenditure:		President District:  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		
Mailing Address		M M / D D / Y M Y M Y		
walling Address		Amount		
City	State Zip Code			
Purpose of Expenditure	Category/ Type	Office Sought: House State:		
Name of Federal Candidate Supported or Opposed		District:		
		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		22183.88		