24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Americans for Prosperity	
	C C90013285
Check if X 24-hour report 48-hour report New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
People Who Think	M M / D D / Y Y Y
Mailing Address 4250 highway 22	03 01 2018 Amount
Suite 7	Amount
City State Zip Code	2824.00
Mandeville LA 70471	Transaction ID: 7 Date of Disbursement or Obligation
Purpose of Expenditure Mailers - Conor Lamb Liberal Agenda Category/ Type 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought: X House District: 18
Lamb, Conor , , ,	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	ursement For: Primary X General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
United States Postal Service	03 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 470 L'Enfant Plaza SW	
Ste 604	Amount
City State Zip Code	1284.25
Washington DC 20024	Transaction ID: 8 Date of Disbursement or Obligation
Purpose of Expenditure Postage for Mailers - Conor Lamb Liberal Agenda Category/ 004	03 01 2018
Туре	00 01 2010
	e Sought:
Lamb, Conor, , ,	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought Disbute 2018	ursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	4108.25
(h) CUDTOTAL of Unitersized Independent Funerality	
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	4108.25
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 (if the reporting entity is not a political party committee) any political party committee or its agent.	
2 410	02 2018
Signature	