

N161022



MISSOURI ETHICS COMMISSION
NON-COMMITTEE EXPENDITURE REPORT
 INSTRUCTIONS ON REVERSE SIDE

1. REPORT DATE 7/17/26	2. FUNCTION OF REPORT (CHECK ONE) ☒ INDEPENDENT EXPENDITURE STATEMENT (S-1) OR ☐ INTERNAL DISSEMINATION REPORT (S-2)	OFFICE USE ONLY JUL 17 2026 Received by Email
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3. NAME OF PERSON OR ENTITY MAKING EXPENDITURE(S) AMERICANS FOR PROSPERITY	
4. MAILING ADDRESS ADDRESS: 4201 WILSON BLVD, STE 1000 CITY / STATE / ZIP: ARLINGTON, VA 22203	5. TELEPHONE NUMBER (703) 224-3200
6. TYPE OF ELECTION (CHECK ONE) ☒ PRIMARY ☐ GENERAL ☐ SPECIAL ☐ CAUCUS	7. DATE OF ELECTION 8/4/2026
8. TYPE OF REPORT (CHECK ONE) ☐ INITIAL REPORT ☐ REPORT WITHIN 14 DAYS OF ELECTION ☒ ADDITIONAL REPORT ☐ OTHER	

9. NAME OF CANDIDATE OR BALLOT MEASURE	10. OFFICE SOUGHT AND/OR POLITICAL SUBDIVISION	11. CHECK ONE SUPP. OPP.	SCHEDULE OF EXPENDITURES 12. PAYEE NAME AND ADDRESS	13. NATURE AND PURPOSE OF EXPENDITURE	14. DATE MADE	15. AMOUNT
Ellen Nichols	SD-32	☒	Ted Prill dba KAP Print 220 Quinn Dr., Dripping Springs, TX 78620	Mailer Printing and Production	7/8/2026	3,674.03
Mike Jones	SD-34	☒	Ted Prill dba KAP Print 220 Quinn Dr., Dripping Springs, TX 78620	Mailer Printing and Production	7/8/2026	4,879.20
Brenden Kelley	HD-127	☒	Ted Prill dba KAP Print 220 Quinn Dr., Dripping Springs, TX 78620	Mailer Printing and Production	7/8/2026	2,056.29
Jamie Ray Gragg	HD-140	☒	Ted Prill dba KAP Print 220 Quinn Dr., Dripping Springs, TX 78620	Mailer Printing and Production	7/13/2026	1,833.52
Jonathan Russell	HD-160	☒	Ted Prill dba KAP Print 220 Quinn Dr., Dripping Springs, TX 78620	Mailer Printing and Production	7/14/2026	1,661.03
Ed Lewis	SD-18	☒	Ted Prill dba KAP Print 220 Quinn Dr., Dripping Springs, TX 78620	Mailer Printing and Production	7/14/2026	3,800.64
Ellen Nichols	SD-32	☒	USPS, 470 L'Enfant Plaza SW #604, Washington, DC 20024	Mailer Postage	7/8/2026	1,778.91
Mike Jones	SD-34	☒	USPS, 470 L'Enfant Plaza SW #604, Washington, DC 20024	Mailer Postage	7/8/2026	2,496.65

16. TOTAL EXPENDITURES MADE (TOTAL COLUMN 15)	\$	22,180.27
17. VERIFICATION: I CERTIFY THAT THIS REPORT IS TRUE AND COMPLETE		
SIGNATURE OF PERSON MAKING THE EXPENDITURE(S) OR AN AUTHORIZED AGENT		M.E.C. ID NO. N/A
		DATE 7/17/24