## FEC FORM 5

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persona (Other than Political Committees) including Qualified Nonprofit Corporations 1. (a) Name of Individual, Organization of Corporation American Majority Actions (number and street) Check indifferent than previously reported PO BOX 309 3. FEC Identification Number Purcellville, VA 20134 is the filer a qualified nonprofit corporation? Yes Yes No Individual filers only Name of Employer Occupation 4. TYPE OF REPORT (check appropriate boxes): (a) April 15 Quarterly Report July 15 Quarterly Report October 15 Quarterly Report January 31 Year-End Report b) Is this Report an amendment? 5. COVERING PERIOD: FROM 6. TOTAL CONTRIBUTIONS..... 7. TOTAL INDEPENDENT EXPENDITURES ... 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. In addition, (If the Independent expenditures reported herein were made by a corporation) I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations. TYPE OR PRINT NAME OF PERSON COMPLETING FORM. **SIGNATURE** the the penalities of 2 U.S.C. §437g.

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

FEC Schedule 5 (REV. 09/2005)

SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES	PAGE OF TOPM 5
NAME OF FILER (In Full)	
American Majority Action, In Full Name (Last, First, Middle Initial) of Payee	<i>c</i> .
Full Name (Last, First, Middle Initial) of Payee	Date
VIP to (ling) Mailing Address	- 11 61 2010
City S-Masters Dr. # 6/6 State Zip Code	889.00
Fort Worth 1 /0151	
Purpose of Expenditure Polos Call S  Category/ Type OC4	Office Sought: House State: VI
Name of Federal Candidate Supported or Opposed by Expenditure:	Check One: Support Oppose
Kapanke	<del></del>
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee	Date
Mailing Address	- 11 01 2010
4410 S. Masters Dr., # lello City - State Zip Code	Amount  Amount
Fort Worth TX 76137	20400
Purpose of Expenditure    Category/ Type OO 4	Office Sought: House State: OH Senate District: OTA 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
TRZ RUS: ness Services, Inc.	- 11 01 2010
4682 State Powte 43 City State Zip Code	Amount
Kent OH 44240	141686
Purpose of Expenditure  Category/ Type  Category/	Office Sought: House State: OH
Name of Federal Candidate Supported or Opposed by Expenditure:	Senate District: 10+1
Corrigan	Check One: Support Oppose
Calondar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	. • 25.09.86
(b) SUBTOTAL of Uniternized Independent Expenditures	en en state en en fant en far men fan en en fan en fan en en En en fan en en en en fan en
(c) TOTAL Independent Expenditures(carry total from last page forward to Line 7)	· b

SCHEDULE 5-E TEMIZED INDEPENDENT EXPENDITURES	PAGE OF FORM 5
NAME OF FILER (In Full)	
American Majority Action, Inc.  Full Name (Last, First, Middle Initial) of Payee	
VIP Printing	Date 2010
4410 5 Mas ters Dratt 616  City State Zip Code	horn den and in a stransformation of a maintained framework and a stransformation of a stransformation of a stransformation of the strans
Fort Worth TX 76137	The state of the s
Purpose of Expenditure  Category/ Type  Co  Type  Type  Co  Type  Co  Type  Co  Type  Co  Type  Co  Type  Co  Type  Type  Co  Type  Co  Type  Type	Office Sought: House State: HA Senate District: 579 President
I-tzpatrick	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
Melling Address 4410 S. Masters Dr. #616	11 61 2010 Amount
State Zip Code TX 76137	Commence of the contract of th
Purpose of Expenditure  Category/ Type  Category/ Type	Office Sought: Senate State: PA
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  Labers Lists, Inc.	Date
2500 116 th Avenue NE	Amount
City State State Zip Code Bellevue WA 98004	1 187139
Purpose of Expenditure  List Rental  Category/ Type  Category/ Type	Office Sought: XHouse State: PA Senate District: DK
Name of Federal Candidate Supported or Opposed by Expenditure:  Marino	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	· 3698.79
(b) SUBTOTAL of Unitemized Independent Expenditures	Secretary consequences for consequences for a secretary consequences for a second consequence of the consequences for a second consequence of the consequences for a second consequence of the consequ
(c) TOTAL Independent Expenditures	· > 620865

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## Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

FOR INCOMING DOCUMENTS  The FEC added this page to the end of this filing to indicate how it was received.		
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USPS Express Mail	Postmarked	
Postmark fllegible	,	
No Postmark		
Overnight Delivery Service (Specify):	Shipping Date	
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Received from Senate Public Records Office	Date of Receipt	
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