

ACTION AMERICA SUPER PAC
9458 TREELAKE RD.
GRANITE BAY, CALIFORNIA 95746

RECEIVED
FEC MAIL CENTER

2020 SEP 10 PM 2:07

September 2, 2020

Federal Election Commission
1050 First St., N.E.
Washington DC 20463

Re: Form 1, Statement of Organization – Unlimited Contributions

To Whom it May Concern:

The committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow.v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Sincerely,


David Bauer, Treasurer

FEC
FORM 1

STATEMENT OF ORGANIZATION

RECEIVED
FEC MAIL CENTER
2020 SEP 10 PM 2:07

Office Use Only

1. NAME OF
COMMITTEE (in full)

(Check if name
is changed)

Example: If typing, type
over the lines.

12FE4M5

ACTION AMERICA SUPER PAC

ADDRESS (number and street)

9458 TREELAKE RD.

(Check if address
is changed)

GRANITE BAY

CA

95746

CITY

STATE

ZIP CODE

COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address)

(Check if address
is changed)

DAVID@THEAGENCY.WS

COMMITTEE'S WEB PAGE ADDRESS (URL)

(Check if address
is changed)

2. DATE

09 / 02 / 2020

3. FEC IDENTIFICATION NUMBER

C

4. IS THIS STATEMENT

NEW (N)

OR

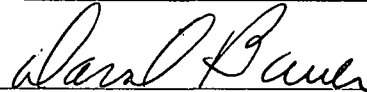
AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

DAVID BAUER

Signature of Treasurer



Date

09 / 02 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office
Use
Only

For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100

FEC FORM 1
(Revised 02/2009)

5. TYPE OF COMMITTEE

Candidate Committee:

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation Office Sought: House Senate President State District

- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

Party Committee:

- (d) This committee is a (National, State or subordinate) committee of the (Democratic, Republican, etc.) Party.

Political Action Committee (PAC):

- (e) This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:
 - Corporation Corporation w/o Capital Stock Labor Organization
 - Membership Organization Trade Association Cooperative
 - In addition, this committee is a Lobbyist/Registrant PAC.
- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)
 - In addition, this committee is a Lobbyist/Registrant PAC.
 - In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)

Joint Fundraising Representative:

- (g) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.
- (h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.

Committees Participating in Joint Fundraiser

1.	_____	FEC ID number	<input type="checkbox"/> C _____
2.	_____	FEC ID number	<input type="checkbox"/> C _____
3.	_____	FEC ID number	<input type="checkbox"/> C _____
4.	_____	FEC ID number	<input type="checkbox"/> C _____

20090202 10:51:50 AM

Write or Type Committee Name

ACTION AMERICA SUPER PAC

6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor

None

Mailing Address

[Empty address fields]

CITY

STATE

ZIP CODE

Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor

7. Custodian of Records: Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name DAVID BAUER

Mailing Address 9458 TREELAKE RD.

[Empty address line]

GRANITE BAY CA 95746

Title or Position

CITY

STATE

ZIP CODE

Custodian of Records

Telephone number 916-473-4298

8. Treasurer: List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer DAVID BAUER

Mailing Address 9458 TREELAKE RD.

[Empty address line]

GRANITE BAY CA 95746

Title or Position

CITY

STATE

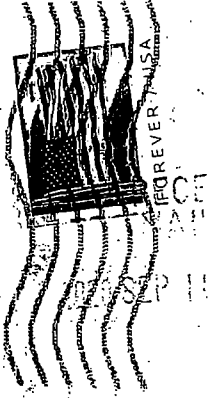
ZIP CODE

Treasurer

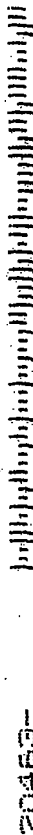
Telephone number 916-473-4298

DAVID BAUER
9458 TREELAKE RD.
GRANITE BAY CA 95746

SACRAMENTO CA 957
03 SEP 2020 PM 5 L




FEDERAL ELECTION COMMISSION
1050 FIRST ST. N.E.
WASHINGTON DC 20463



20463

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Date of Receipt <i>09/10/20</i>
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) <i>09/03/20</i>
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

 PREPARER	<i>09/14/20</i> DATE PREPARED
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