

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation American Majority Action			3. FEC Identification Number C C90011891
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 10936 North Port Washington Road			
(c) City, State and ZIP Code Mequon WI 53092			
2. Occupation and Name of Employer (for Individual Filers Only)			

4. TYPE OF REPORT (check appropriate boxes):

- (a) April 15 Quarterly Report
- July 15 Quarterly Report 24-Hour Report
- October 15 Quarterly Report 48-Hour Report
- January 31 Year-End Report

b) Is this Report an amendment? No Yes, it amends the report filed on / /

5. COVERING PERIOD: FROM / / THROUGH / /

6. TOTAL CONTRIBUTIONS..... .00

7. TOTAL INDEPENDENT EXPENDITURES 1002.62

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.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Amorin, Kelly, , ,	Amorin, Kelly, , ,	11/08/2016

[Electronically Filed]

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
American Majority Action

Full Name (Last, First, Middle Initial) of Payee Garvey, William, S, ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 8519 Volkman Street		Amount 82.50	
City Rothschild	State WI	Zip Code 54474	Transaction ID : F57.000001
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		1190.25	

Full Name (Last, First, Middle Initial) of Payee Charpentier, David, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address N2014 13th Road		Amount 78.75	
City Montello	State WI	Zip Code 53949	Transaction ID : F57.000002
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		785.25	

Full Name (Last, First, Middle Initial) of Payee Hettig, Michael, A, ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 3411 West Lynndale Avenue		Amount 45.00	
City Greenfield	State WI	Zip Code 53221	Transaction ID : F57.000003
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		123.75	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	206.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....▶ (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
American Majority Action

Full Name (Last, First, Middle Initial) of Payee Resop, Mara, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 1719 Arizona Street		Amount 30.00	
City Oshkosh	State WI	Zip Code 54902	Transaction ID : F57.000004
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 302.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Boyette, Kathie, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 807 Nicolet Blvd		Amount 90.00	
City Neenah	State WI	Zip Code 54956	Transaction ID : F57.000005
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 185.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Spencer, Nancy, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 807 Nicolet Blvd		Amount 30.00	
City Neenah	State WI	Zip Code 54956	Transaction ID : F57.000006
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 30.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	150.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
American Majority Action

Full Name (Last, First, Middle Initial) of Payee Batzel, Matt, , ,		Date of Public Distribution/Dissemination 11 / 06 / 2016	
Mailing Address 107 South 6th Street		Amount 114.21	
City Cedar Grove	State WI	Zip Code 53013	Transaction ID : F57.000007
Purpose of Expenditure Distribution of literature	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1654.19		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Donat, Rachel, , ,		Date of Public Distribution/Dissemination 11 / 06 / 2016	
Mailing Address P.O. Box 444		Amount 25.00	
City Oxford	State WI	Zip Code 53952	Transaction ID : F57.000008
Purpose of Expenditure Distribution of literature	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 437.75		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Ellis, Scott, , ,		Date of Public Distribution/Dissemination 11 / 06 / 2016	
Mailing Address 231 North Fowler Street #304		Amount 72.12	
City Oconomowoc	State WI	Zip Code 53066	Transaction ID : F57.000009
Purpose of Expenditure Distribution of literature	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 937.53		Disbursement For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	211.33
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
American Majority Action

Full Name (Last, First, Middle Initial) of Payee Mucciolo, Tanya, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address W12308 Reeds Corners Road		Amount 26.79	
City Ripon	State WI	Zip Code 54971	Transaction ID : F57.000010
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1806.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Nelson, Nate, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 3977 Leonard Point Road		Amount 40.38	
City Oshkosh	State WI	Zip Code 54904	Transaction ID : F57.000011
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 605.70		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Simac, Kim, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 3860 Kula Vista Drive		Amount 85.71	
City Eagle River	State WI	Zip Code 54521	Transaction ID : F57.000012
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 1114.23		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	152.88
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
American Majority Action

Full Name (Last, First, Middle Initial) of Payee Storms, Jason, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 955 County C		Amount 37.89	
City Grafton	State WI	Zip Code 53024	
Purpose of Expenditure Distribution of literature		Category/ Type	Transaction ID : F57.000013
Name of Federal Candidate Supported or Opposed by Expenditure: Johnson, Ron, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Calendar Year-To-Date Per Election for Office Sought		531.64	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Batzel, Matt, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 107 South 6th Street		Amount 114.21	
City Cedar Grove	State WI	Zip Code 53013	
Purpose of Expenditure Distribution of literature		Category/ Type	Transaction ID : F57.000014
Name of Federal Candidate Supported or Opposed by Expenditure: Gallagher, Mike, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 08
Calendar Year-To-Date Per Election for Office Sought		685.26	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Donat, Rachel, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address P.O. Box 444		Amount 25.00	
City Oxford	State WI	Zip Code 53952	
Purpose of Expenditure Distribution of literature		Category/ Type	Transaction ID : F57.000015
Name of Federal Candidate Supported or Opposed by Expenditure: Gallagher, Mike, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 08
Calendar Year-To-Date Per Election for Office Sought		150.00	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	2016 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	177.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF FILER (In Full)
American Majority Action

Full Name (Last, First, Middle Initial) of Payee Mucciolo, Tanya, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address W12308 Reeds Corners Road		Amount 26.79	
City Ripon	State WI	Zip Code 54971	Transaction ID : F57.000016
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Gallagher, Mike, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 160.74		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Nelson, Nate, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 3977 Leonard Point Road		Amount 40.38	
City Oshkosh	State WI	Zip Code 54904	Transaction ID : F57.000017
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Gallagher, Mike, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 242.28		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Storms, Jason, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 06 / 2016	
Mailing Address 955 County C		Amount 37.89	
City Grafton	State WI	Zip Code 53024	Transaction ID : F57.000018
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: Gallagher, Mike, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 227.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	105.06
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	1002.62