

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

1. (a) Name of Individual, Organization or Corporation American Majority Action, Inc		3. FEC Identification Number C
(b) Address (number and street) check if different than previously reported PO Box 309		
(c) City, State and ZIP Code Purcellville VA 20134		
2. Corporate filers only	Is the filer a qualified nonprofit corporation? 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

24-Hour Report

October 15 Quarterly Report

January 31 Year-End Report

48-Hour Report

b) Is this Report an amendment? Yes No

5. COVERING PERIOD: FROM

10 01 2010

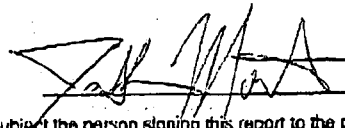
THROUGH

11 02 2010

6. TOTAL CONTRIBUTIONS

7. TOTAL INDEPENDENT EXPENDITURES **69,568.00**

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	DATE
Jonathan Martin		10-13-2010

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

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action, Inc

Full Name (Last, First, Middle Initial) of Payee Direct Technology Solutions		Date 09 22 2010
Mailing Address Po Box 22243		Amount 242.00
City Pittsburgh	State PA	
Purpose of Expenditure Telephone Expense		Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Tim Burns		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12th
Calendar Year-To-Date Per Election for Office Sought 242.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Direct Technology Solutions		Date 09 22 2010
Mailing Address Po Box 22243		Amount 242.00
City Pittsburgh	State PA	
Purpose of Expenditure Telephone Expense		Category/Type 004
Name of Federal Candidate Supported or Opposed by Expenditure: Mike Kelly		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 3rd
Calendar Year-To-Date Per Election for Office Sought 242.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Purpose of Expenditure		Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶
(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action, Inc

Full Name (Last, First, Middle Initial) of Payee Direct Technology Solutions		Date 09 30 2010
Mailing Address PO BOX 22243		Amount 1575.00
City Pittsburgh	State PA	
Zip Code 15222		
Purpose of Expenditure Telephone Expense	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1575.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Direct Tehnology Solutions		Date 09 22 2010
Mailing Address PO Box 22243		Amount 851.00
City Pittsburgh	State PA	
Zip Code 15222		
Purpose of Expenditure Telephone Expense	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 8th
Name of Federal Candidate Supported or Opposed by Expenditure: Mike Fitzpatrick		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 851.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Direct Technology Solutions		Date 09 22 2010
Mailing Address PO BOX 22243		Amount 242.00
City Pittsburgh	State PA	
Zip Code 15222		
Purpose of Expenditure Telephone Expense	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 4th
Name of Federal Candidate Supported or Opposed by Expenditure: Keith Rothfus		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 242.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶
(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee

RRB Printing For Business

Date

09 30 2010

Mailing Address

1165 Markkress Road Unit G.

Amount

356.00

City

Cherry Hill

State

NJ

Zip Code

08003

Purpose of Expenditure

Palm Cards

Category/
Type 004

Office Sought: House

State: PA

Senate

District: 7th

President

Check One: Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Patrick Meehan

Calendar Year-To-Date Per Election
for Office Sought

356.00

Disbursement For: Primary

General

Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Raff Printing, Inc

Date

09 30 2010

Mailing Address

2201 Mary St

Amount

335.00

City

Pittsburgh

State

PA

Zip Code

15203

Purpose of Expenditure

Palm Cards

Category/
Type 004

Office Sought: House

State: PA

Senate

District: 12th

President

Check One: Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tim Burns

Calendar Year-To-Date Per Election
for Office Sought

335.00

Disbursement For: Primary

General

Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee

Raff Printing, Inc

Date

09 30 2010

Mailing Address

2201 Mary St

Amount

335.00

City

Pittsburgh

State

PA

Zip Code

15203

Purpose of Expenditure

Palm Cards

Category/
Type 004

Office Sought: House

State: PA

Senate

District: 3rd

President

Check One: Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Brian Mike Kelly

Calendar Year-To-Date Per Election
for Office Sought

335.00

Disbursement For: Primary

General

Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee

KRB Printing For Business

Date

09 30 2010

Mailing Address

1165 Markkress Road Unit G

Amount

356.00

City

Cherry Hill

State

NJ

Zip Code

08003

Purpose of Expenditure

Palm Cards

Category/Type

004

Office Sought:

House

State: PA

Senate

District: 8th

President

Name of Federal Candidate Supported or Opposed by Expenditure:

Mike Fitzpatrick

Check One:

Support

Oppose

Calendar Year-To-Date Per Election for Office Sought

356.00

Disbursement For:

Primary

General

Other (specify)

Full Name (Last, First, Middle Initial) of Payee

KRB Printing For Business

Date

09 30 20 10

Mailing Address

1165 Markkress Road Unit G

Amount

356.00

City

Cherry Hill

State

NJ

Zip Code

08003

Purpose of Expenditure

Palm Cards

Category/Type

004

Office Sought:

House

State: PA

Senate

District: 11th

President

Name of Federal Candidate Supported or Opposed by Expenditure:

Lou Barletta

Check One:

Support

Oppose

Calendar Year-To-Date Per Election for Office Sought

356.00

Disbursement For:

Primary

General

Other (specify)

Full Name (Last, First, Middle Initial) of Payee

KRB Printing For Business

Date

09 30 2010

Mailing Address

1165 Markkress Rd Unit G

Amount

356.00

City

Cherry Hill

State

NJ

Zip Code

08003

Purpose of Expenditure

Palm Cards

Category/Type

004

Office Sought:

House

State: PA

Senate

District: 9th

President

Name of Federal Candidate Supported or Opposed by Expenditure:

Keith Rothfus

Check One:

Support

Oppose

Calendar Year-To-Date Per Election for Office Sought

356.00

Disbursement For:

Primary

General

Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee <i>Faulkner Strategies</i>		Date <i>09 27 2010</i>
Mailing Address <i>12801 Sandy Court</i>		Amount <i>6,613.00</i>
City <i>Granger</i>	State <i>IN</i>	
Zip Code <i>46530</i>		
Purpose of Expenditure <i>Printed Yard Signs: cards</i>	Category/Type <i>004</i>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>IND</i> District: <i>7th</i>
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Billy Long</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>6,613.00</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Direct Technology Solutions</i>		Date <i>09 22 2010</i>
Mailing Address <i>PO BOX 22243</i>		Amount <i>1,260.00</i>
City <i>Pittsburgh</i>	State <i>PA</i>	
Zip Code <i>15222</i>		
Purpose of Expenditure <i>Telephone Expense</i>	Category/Type <i>004</i>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>MD</i> District: <i>7th</i>
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Billy Long</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>1,260.00</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Faulkner Strategies</i>		Date <i>09 07 2010</i>
Mailing Address <i>12801 Sandy Court</i>		Amount <i>8,613.00</i>
City <i>Granger</i>	State <i>IN</i>	
Zip Code <i>46530</i>		
Purpose of Expenditure <i>Printed Yard Signs: Cards</i>	Category/Type <i>004</i>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>MD</i> District: <i>3rd</i>
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Ed Martin</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>8,613.00</i>		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	
(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee <i>Direct Technology Solutions</i>		Date <i>09 22 2010</i>
Mailing Address <i>PO Box 22243</i>		Amount <i>1,260.00</i>
City <i>Pittsburgh</i>	State <i>PA</i>	
Purpose of Expenditure <i>Telephone Expense</i>		Category/Type <i>004</i>
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Ed Martin</i>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>MO</i> District: <i>3rd</i>
Calendar Year-To-Date Per Election for Office Sought <i>126000</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Faulkner Strategies</i>		Date <i>09 07 2010</i>
Mailing Address <i>12801 Sandy Court</i>		Amount <i>10,018.00</i>
City <i>Granger</i>	State <i>IN</i>	
Purpose of Expenditure <i>Yard Signs; Cards</i>		Category/Type <i>004</i>
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Rob Portman</i>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>OH</i> District: _____
Calendar Year-To-Date Per Election for Office Sought <i>10,01800</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Direct Technology Solutions</i>		Date <i>09 22 2010</i>
Mailing Address <i>PO Box 22243</i>		Amount <i>1,355.00</i>
City <i>Pittsburgh</i>	State <i>PA</i>	
Purpose of Expenditure <i>Telephone Expense</i>		Category/Type <i>004</i>
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Rob Portman</i>		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>OH</i> District: _____
Calendar Year-To-Date Per Election for Office Sought <i>1,355.00</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶

(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee <u>Faulkner Strategies</u>		Date <u>09 07 2010</u>
Mailing Address <u>12801 Sandy Court</u>		Amount <u>2505.00</u>
City <u>Granger</u>	State <u>IN</u>	
Purpose of Expenditure <u>Yard Signs; Cards</u>	Category/Type <u>004</u>	Office Sought: <input checked="" type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: <u>1</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Steve Chabot</u>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <u>2505.00</u>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <u>Faulkner Strategies</u>		Date <u>09 07 2010</u>
Mailing Address <u>12801 Sandy Court</u>		Amount <u>2505.00</u>
City <u>Granger</u>	State <u>IN</u>	
Purpose of Expenditure <u>Yard Signs; Cards</u>	Category/Type <u>004</u>	Office Sought: <input checked="" type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: <u>13th</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Tom Ganley</u>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <u>2505.00</u>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <u>Direct Technology Solutions</u>		Date <u>09 22 2010</u>
Mailing Address <u>PO BOX 22243</u>		Amount <u>347.00</u>
City <u>Pittsburgh</u>	State <u>PA</u>	
Purpose of Expenditure <u>Telephone Expense</u>	Category/Type <u>004</u>	Office Sought: <input checked="" type="checkbox"/> House State: <u>OH</u> <input type="checkbox"/> Senate District: <u>13th</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <u>Tom Ganley</u>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <u>347.00</u>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶
(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee <i>Faulkner Strategies</i>		Date <i>09 07 2010</i>
Mailing Address <i>12801 Sandy Court</i>		Amount <i>250500</i>
City <i>Granger</i>	State <i>IN</i>	
Zip Code <i>46530</i>		
Purpose of Expenditure <i>Yard Signs & Cards</i>	Category/Type <i>004</i>	Office Sought: <input checked="" type="checkbox"/> House State: <i>OH</i> <input type="checkbox"/> Senate District: <i>16th</i> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Jim Renacci</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>250500</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Direct Technology Solutions</i>		Date <i>09 22 2010</i>
Mailing Address <i>PO BOX 22243</i>		Amount <i>34700</i>
City <i>Pittsburgh</i>	State <i>PA</i>	
Zip Code <i>15222</i>		
Purpose of Expenditure <i>Telephone Expense</i>	Category/Type <i>004</i>	Office Sought: <input checked="" type="checkbox"/> House State: <i>OH</i> <input type="checkbox"/> Senate District: <i>16th</i> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Jim Renacci</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>34700</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Faulkner Strategies</i>		Date <i>09 07 2010</i>
Mailing Address <i>12801 Sandy Court</i>		Amount <i>250500</i>
City <i>Granger</i>	State <i>IN</i>	
Zip Code <i>46530</i>		
Purpose of Expenditure <i>Yard Signs & Cards</i>	Category/Type <i>004</i>	Office Sought: <input checked="" type="checkbox"/> House State: <i>OH</i> <input type="checkbox"/> Senate District: <i>15th</i> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Steve Stivers</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>250500</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶
(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action Inc

Full Name (Last, First, Middle Initial) of Payee Faulkner Strategies		Date 09 07 2010
Mailing Address 12801 Sandy Court		Amount 2717.00
City Granger	State IN	
Zip Code 46530		
Purpose of Expenditure Yard Signs & Cards	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>PA</u> <input type="checkbox"/> Senate District: <u>7th</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Patrick Meehan		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2717.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Faulkner Strategies		Date 09 07 2010
Mailing Address 12801 Sandy Court		Amount 2717.00
City Granger	State IN	
Zip Code 46530		
Purpose of Expenditure Yard signs & cards	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>PA</u> <input type="checkbox"/> Senate District: <u>8th</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mike Fitzpatrick		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2717.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Direct Technology Solutions		Date 09 22 2010
Mailing Address PO Box 22243		Amount 851.00
City Pittsburgh	State PA	
Zip Code 15222		
Purpose of Expenditure Telephone Expense	Category/Type 004	Office Sought: <input checked="" type="checkbox"/> House State: <u>PA</u> <input type="checkbox"/> Senate District: <u>8th</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Mike Fitzpatrick		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 851.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶
(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee

Direct Technology Solutions

Date

09 22 2010

Mailing Address

PO. BOX 22243

Amount

242.00

City

Pittsburgh

State

PA

Zip Code

15222

Purpose of Expenditure

Telephone Expense

Category/
Type 004

Office Sought: House

State: PA

Senate

District: 12th

President

Check One: Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Tim Burns

Calendar Year-To-Date Per Election
for Office Sought

24200

Disbursement For: Primary General

Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Faulkner Strategies

Date

09 07 2010

Mailing Address

12801 Sandy Court

Amount

2717.00

City

Granger

State

IN

Zip Code

46530

Purpose of Expenditure

Yard signs & cards

Category/
Type 004

Office Sought: House

State: PA

Senate

District: 4th

President

Check One: Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Keith Rothfus

Calendar Year-To-Date Per Election
for Office Sought

271700

Disbursement For: Primary General

Other (specify)

Full Name (Last, First, Middle Initial) of Payee

Direct Technology Solutions

Date

09 22 2010

Mailing Address

PO BOX 22243

Amount

242.00

City

Pittsburgh

State

PA

Zip Code

15222

Purpose of Expenditure

Telephone Expense

Category/
Type 004

Office Sought: House

State: PA

Senate

District: 4th

President

Check One: Support

Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Keith Rothfus

Calendar Year-To-Date Per Election
for Office Sought

242.00

Disbursement For: Primary General

Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

(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**

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action, Inc

Full Name (Last, First, Middle Initial) of Payee <i>Faulkner Strategies</i>		Date <i>09 07 2010</i>
Mailing Address <i>12801 Sandy Court</i>		Amount <i>2717.00</i>
City <i>Granger</i>	State <i>IN</i>	
Zip Code <i>46530</i>		
Purpose of Expenditure <i>Yard signs & cards</i>	Category/Type <i>004</i>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>PA</i> District: <i>11th</i>
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Lou Barletta</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>2717.00</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Direct Technology Solutions</i>		Date <i>09 22 2010</i>
Mailing Address <i>PO Box 22243</i>		Amount <i>662.00</i>
City <i>Pittsburgh</i>	State <i>PA</i>	
Zip Code <i>15222</i>		
Purpose of Expenditure <i>telephone expense</i>	Category/Type <i>004</i>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <i>OH</i> District: <i>15th</i>
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Steve Stivers</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>662.00</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee <i>Faulkner Strategies</i>		Date <i>09 07 2010</i>
Mailing Address <i>12801 Sandy Court</i>		Amount <i>10869.00</i>
City <i>Granger</i>	State <i>IN</i>	
Zip Code <i>46530</i>		
Purpose of Expenditure <i>Yard & Card signs</i>	Category/Type <i>004</i>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <i>PA</i> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: <i>Pat Toomey</i>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <i>10869.00</i>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

(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

PAGE OF
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)
American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee Direct Technology Solutions		Date 09 22 2010
Mailing Address PO Box 22243		Amount 1575.00
City Pittsburgh	State Zip Code PA 15222	
Purpose of Expenditure Telephone Expense	Category/Type 004	Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1575.00		Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee KRIB Printing For Business		Date 09 30 2010
Mailing Address 1165 MarlKress Rd Unit G		Amount 1424.00
City Cherry Hill	State Zip Code NJ 08003	
Purpose of Expenditure Palm Cards	Category/Type 004	Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1424.00		Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Raff Printing, Inc		Date 09 30 2010
Mailing Address 2201 Mary St		Amount 670.00
City Pittsburgh	State Zip Code PA 15203	
Purpose of Expenditure Palm Cards	Category/Type 004	Office Sought: House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President <input type="checkbox"/> State: PA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Pat Toomey		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 670.00		Disbursement For: Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) _____

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

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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