

# 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 <b>American Majority Action, Inc.</b>		3. FEC Identification Number <b>C</b> C90011891
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported P.O. Box 309		
(c) City, State and ZIP Code Purcellville VA 20134		
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 ..... 2392.25

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Amorin, Kelly, , ,	Amorin, Kelly, , ,	10/16/2020
	<i>[Electronically Filed]</i>	

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, Inc.

Full Name (Last, First, Middle Initial) of Payee Hill, Abigail, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 4600 Alabama Avenue		Amount 14.00	
City Lynchbug	State VA	Zip Code 24502	Transaction ID : F57.000001
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hill, Abigail, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 4600 Alabama Avenue		Amount 14.00	
City Lynchbug	State VA	Zip Code 24502	Transaction ID : F57.000002
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Hill, Abigail, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 4600 Alabama Avenue		Amount 28.00	
City Lynchbug	State VA	Zip Code 24502	Transaction ID : F57.000003
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	56.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Wehrly, Annie, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 4600 Alabama Avenue		Amount 28.00	
City Lynchburg	State VA	Zip Code 24502	
Purpose of Expenditure Distribution of literature		Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.000004

Full Name (Last, First, Middle Initial) of Payee Wehrley, Annie, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 4600 Alabama Avenue		Amount 28.00	
City Lynchburg	State VA	Zip Code 24502	
Purpose of Expenditure Distribution of literature		Category/Type	Office Sought: <input type="checkbox"/> House State: VA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.000005

Full Name (Last, First, Middle Initial) of Payee Wehrley, Annie, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 4600 Alabama Avenue		Amount 56.00	
City Lynchburg	State VA	Zip Code 24502	
Purpose of Expenditure Distribution of literature		Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : F57.000006

(a) SUBTOTAL of Itemized Independent Expenditures.....	112.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Duke, Ashley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 3014 Driver Station Way W		Amount 10.50	
City Suffolk	State VA	Zip Code 23435	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000007
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		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 Duke, Ashley, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 3014 Driver Station Way W		Amount 10.50	
City Suffolk	State VA	Zip Code 23435	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000008
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Calendar Year-To-Date Per Election for Office Sought		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 Duke, Ashey, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 3014 Driver Station Way W		Amount 21.00	
City Suffolk	State VA	Zip Code 23435	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000009
Name of Federal Candidate Supported or Opposed by Expenditure: Freitas, Nick, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 07
Calendar Year-To-Date Per Election for Office Sought		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.....	42.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Fouse, Benjamin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 8408 Queen Elizabeth Blvd		Amount 21.00	
City Annandale	State VA	Zip Code 22003	Transaction ID : F57.000010
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Fouse, Benjamin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 8408 Queen Elizabeth Blvd		Amount 21.00	
City Annandale	State VA	Zip Code 22003	Transaction ID : F57.000011
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Fouse, Benjamin, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 8408 Queen Elizabeth Blvd		Amount 42.00	
City Annandale	State VA	Zip Code 22003	Transaction ID : F57.000012
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	84.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Mish, Bruce, , ,		Date of Public Distribution/Dissemination 10 / 10 / 2020	
Mailing Address 492 Boscobel Ferry Road		Amount 7.00	
City Manakin-Sabot	State VA	Zip Code 23103	Transaction ID : F57.000013
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mish, Bruce, , ,		Date of Public Distribution/Dissemination 10 / 10 / 2020	
Mailing Address 492 Boscobel Ferry Road		Amount 7.00	
City Manakin-Sabot	State VA	Zip Code 23103	Transaction ID : F57.000014
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 7.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mish, Bruce, , ,		Date of Public Distribution/Dissemination 10 / 10 / 2020	
Mailing Address 492 Boscobel Ferry Road		Amount 14.00	
City Manakin-Sabot	State VA	Zip Code 23103	Transaction ID : F57.000015
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	28.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Salgado, Catherine, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 92 Christendom Drive		Amount 24.50	
City Front Royal	State VA	Zip Code 22630	Transaction ID : F57.000016
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 24.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Salgado, Catherine, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 92 Christendom Drive		Amount 24.50	
City Front Royal	State VA	Zip Code 22630	Transaction ID : F57.000017
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 24.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Salgado, Catherine, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 92 Christendom Drive		Amount 42.00	
City Front Royal	State VA	Zip Code 22630	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: VA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 42.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	91.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Hazard, Charlotte, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 59 Harwill Drive		Amount 30.00	
City Stafford	State VA	Zip Code 22556	Transaction ID : F57.000019
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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) _____	

Full Name (Last, First, Middle Initial) of Payee Hazard, Charlotte, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 59 Harwill Drive		Amount 30.00	
City Stafford	State VA	Zip Code 22556	Transaction ID : F57.000020
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		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) _____	

Full Name (Last, First, Middle Initial) of Payee Colson, Christian, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 1446 Spotswood Drive		Amount 37.00	
City Locust Grove	State VA	Zip Code 22508	Transaction ID : F57.000021
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 37.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	97.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Colson, Christian, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 1446 Spotswood Drive		Amount 38.50	
City Locust Grove	State VA	Zip Code 22508	Transaction ID : F57.000022
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 38.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Colson, Christian, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 1446 Spotswood Drive		Amount 21.00	
City Locust Grove	State VA	Zip Code 22508	Transaction ID : F57.000023
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Andrews, Aliscia, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 21.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Mack, Christian, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 1117 Centerville Turnpike #409		Amount 35.00	
City Virginia Beach	State VA	Zip Code 23464	Transaction ID : F57.000024
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 35.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	94.50
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Mack, Christian, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 1117 Centerville Turnpike #409		Amount 35.00	
City Virginia Beach	State VA	Zip Code 23464	Transaction ID : F57.000025
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Harrison, Emily, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 1971 University Blvd MSC Box 146864		Amount 49.00	
City Lynchburg	State VA	Zip Code 24515	Transaction ID : F57.000026
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Harrison, Emily, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 1971 University Blvd MSC Box 146864		Amount 49.00	
City Lynchburg	State VA	Zip Code 24515	Transaction ID : F57.000027
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	133.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Harrison, Emily, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 1971 University Blvd MSC Box 146864		Amount 98.00	
City Lynchburg	State VA	Zip Code 24515	Transaction ID : F57.000028
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		98.00	

Full Name (Last, First, Middle Initial) of Payee Radel, Eric, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 10742 Greenbriar Lane		Amount 52.50	
City Spotsylvania	State VA	Zip Code 22553	Transaction ID : F57.000029
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		52.50	

Full Name (Last, First, Middle Initial) of Payee Radel, Eric, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 10742 Greenbriar Lane		Amount 52.50	
City Spotsylvania	State VA	Zip Code 22553	Transaction ID : F57.000030
Purpose of Expenditure text bank	Category/ Type	Office Sought: <input type="checkbox"/> House State: VA <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: Gade, Daniel, , ,		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		52.50	

(a) SUBTOTAL of Itemized Independent Expenditures.....	203.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Radel, Eric, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 10742 Greenbriar Lane		Amount 7.00	
City Spotsylvania	State VA	Zip Code 22553	Transaction ID : F57.000031
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Radel, Eric, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 10742 Greenbriar Lane		Amount 14.00	
City Spotsylvania	State VA	Zip Code 22553	Transaction ID : F57.000032
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Freitas, Nick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Whittaker, Faustina, , ,		Date of Public Distribution/Dissemination 10 / 11 / 2020	
Mailing Address 948 Rocky Glen Drive		Amount 28.00	
City White Post	State VA	Zip Code 22663	Transaction ID : F57.000033
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	49.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Whittaker, Faustina, , ,		Date of Public Distribution/Dissemination 10 / 11 / 2020	
Mailing Address 948 Rocky Glen Drive		Amount 28.00	
City	State	Zip Code	Transaction ID : F57.000034
White Post	VA	22663	
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2020	

Full Name (Last, First, Middle Initial) of Payee Lansing, George, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address P.O. Box 14		Amount 59.50	
City	State	Zip Code	Transaction ID : F57.000035
Rockville	VA	23146	
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2020	

Full Name (Last, First, Middle Initial) of Payee Lansing, George, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address P.O. Box 14		Amount 59.50	
City	State	Zip Code	Transaction ID : F57.000036
Rockville	VA	23146	
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
		2020	

(a) SUBTOTAL of Itemized Independent Expenditures.....	147.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Lansing, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address P.O. Box 14		Amount 42.00	
City Rockville	State VA	Zip Code 23146	Transaction ID : F57.000037
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 42.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lansing, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address P.O. Box 14		Amount 59.50	
City Rockville	State VA	Zip Code 23146	Transaction ID : F57.000038
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Freitas, Nick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 59.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Lansing, George, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address P.O. Box 14		Amount 17.50	
City Rockville	State VA	Zip Code 23146	Transaction ID : F57.000039
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Andrews, Aliscia, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 17.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	119.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Dickinson, Hunter, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 41317 Pencader Way		Amount 22.50	
City Leesburg	State VA	Zip Code 20175	Transaction ID : F57.000041
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 22.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dickinson, Hunter, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 41317 Pencader Way		Amount 22.50	
City Leesburg	State VA	Zip Code 20175	Transaction ID : F57.000042
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 22.50		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Dickinson, Hunter, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 41317 Pencader Way		Amount 45.00	
City Leesburg	State VA	Zip Code 20175	Transaction ID : F57.000043
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Andrews, Aliscia, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 42.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	90.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Jones, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 11 / 2020	
Mailing Address 1450 Cloud High Road		Amount 70.00	
City Duffield	State VA	Zip Code 24244	Transaction ID : F57.000044
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 70.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Jones, Joshua, , ,		Date of Public Distribution/Dissemination 10 / 11 / 2020	
Mailing Address 1450 Cloud High Drive		Amount 70.00	
City Duffield	State VA	Zip Code 24244	Transaction ID : F57.000045
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 70.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Moore, Kaylee, , ,		Date of Public Distribution/Dissemination 10 / 12 / 2020	
Mailing Address 5105 Mariners Cove		Amount 21.00	
City Suffolk	State VA	Zip Code 23435	Transaction ID : F57.000046
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 21.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	161.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Moore, Kaylee, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 12 / 2020	
Mailing Address 5105 Mariners Cove		Amount 21.00	
City Suffolk	State VA	Zip Code 23435	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000047
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
21.00			

Full Name (Last, First, Middle Initial) of Payee Vicente, Maria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 541 Eric Court		Amount 7.00	
City Front Royal	State VA	Zip Code 22630	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000048
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
7.00			

Full Name (Last, First, Middle Initial) of Payee Vicente, Maria, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 541 Eric Court		Amount 7.00	
City Front Royal	State VA	Zip Code 22630	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000049
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Calendar Year-To-Date Per Election for Office Sought		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
7.00			

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	35.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Vicente, Maria, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 541 Eric Court		Amount 14.00	
City Front Royal	State VA	Zip Code 22630	Transaction ID : F57.000050
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 14.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anderson, Mary, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 2410 North Chase Road		Amount 49.00	
City Liberty Lake	State WA	Zip Code 99019	Transaction ID : F57.000051
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 49.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Anderson, Mary, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 2410 North Chase Road		Amount 49.00	
City Liberty Lake	State WA	Zip Code 99019	Transaction ID : F57.000052
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 49.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	112.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Knowlton, Max, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2020	
Mailing Address 1142 Round Pebble Lane		Amount 18.75	
City Reston	State VA	Zip Code 20194	Transaction ID : F57.000053
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Knowlton, Max, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2020	
Mailing Address 1142 Round Pebble Lane		Amount 18.75	
City Reston	State VA	Zip Code 20194	Transaction ID : F57.000054
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Knowlton, Max, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2020	
Mailing Address 1142 Round Pebble Lane		Amount 37.50	
City Reston	State VA	Zip Code 20194	Transaction ID : F57.000055
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Freitas, Nick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	75.00
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Wehrly, Nathan, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 14367 Township Road 37		Amount 28.00	
City Findlay	State OH	Zip Code 45840	Transaction ID : F57.000056
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wehrly, Nathan, , ,		Date of Public Distribution/Dissemination 10 / 13 / 2020	
Mailing Address 14367 Township Road 37		Amount 28.00	
City Findlay	State OH	Zip Code 45840	Transaction ID : F57.000057
Purpose of Expenditure Text bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Mumford, Ryan, , ,		Date of Public Distribution/Dissemination 10 / 10 / 2020	
Mailing Address 4610 John Marshall Highway		Amount 22.75	
City Strasburg	State VA	Zip Code 22657	Transaction ID : F57.000058
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	78.75
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Mumford, Ryan, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 10 / 2020	
Mailing Address 4610 John Marshall Highway		Amount 22.75	
City Strasburg	State VA	Zip Code 22657	Transaction ID : F57.000059
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stahl, Samantha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 707 Walder Trail		Amount 67.50	
City San Antonio	State TX	Zip Code 78260	Transaction ID : F57.000060
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Stahl, Samantha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 707 Walder Trail		Amount 67.50	
City San Antonio	State TX	Zip Code 78260	Transaction ID : F57.000061
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	157.75
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Stahl, Samantha, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 707 Walder Trail		Amount 60.00	
City San Antonio	State TX	Zip Code 78260	Transaction ID : F57.000062
Purpose of Expenditure Phone bank	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Freitas, Nick, , ,		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		60.00	

Full Name (Last, First, Middle Initial) of Payee Dickinson, Sophia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 41317 Pencader Way		Amount 26.25	
City Leesburg	State VA	Zip Code 20175	Transaction ID : F57.000063
Purpose of Expenditure Phone bank	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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		26.25	

Full Name (Last, First, Middle Initial) of Payee Dickinson, Sophia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 41317 Pencader Way		Amount 26.25	
City Leesburg	State VA	Zip Code 20175	Transaction ID : F57.000064
Purpose of Expenditure Phone bank	Category/Type	Office Sought: <input type="checkbox"/> House State: VA <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: Gade, Daniel, , ,		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		26.25	

(a) SUBTOTAL of Itemized Independent Expenditures.....	112.50
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Dickinson, Sophia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 41317 Pencader Way		Amount 52.50	
City Leesburg	State VA	Zip Code 20175	Transaction ID : F57.000065
Purpose of Expenditure Phone bank	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 10
Name of Federal Candidate Supported or Opposed by Expenditure: Andrews, Aliscia, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rossie, Stephen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 513 N Arthur Ashe Blvd #18		Amount 32.81	
City Richmind	State VA	Zip Code 23220	Transaction ID : F57.000066
Purpose of Expenditure Distribution of literature	Category/Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Rossie, Stephen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 513 N Arthur Ashe Blvd #18		Amount 32.81	
City Richmond	State VA	Zip Code 23220	Transaction ID : F57.000067
Purpose of Expenditure Distribution of literature	Category/Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	118.12
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Rossie, Stephen, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 513 N Arthur Ashe Blvd #18		Amount 65.63	
City Richmond	State VA	Zip Code 23220	Transaction ID : F57.000068
Purpose of Expenditure Distribution of literature	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Freitas, Nick, , ,		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		65.63	

Full Name (Last, First, Middle Initial) of Payee Schermerhorn, Truman, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 2715 Pleasant run Drive		Amount 18.75	
City Henrico	State VA	Zip Code 23233	Transaction ID : F57.000069
Purpose of Expenditure Phone bank	Category/Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		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		18.75	

Full Name (Last, First, Middle Initial) of Payee Schermerhorn, Truman, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 2715 Pleasant Run Drive		Amount 18.75	
City Henrico	State VA	Zip Code 23233	Transaction ID : F57.000070
Purpose of Expenditure Phone bank	Category/Type	Office Sought: <input type="checkbox"/> House State: VA <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: Gade, Daniel, , ,		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		18.75	

(a) SUBTOTAL of Itemized Independent Expenditures.....	103.13
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Schmerhorn, Truman, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 2715 Pleasant run Drive		Amount 37.50	
City State Zip Code Henrico VA 23233	Transaction ID : F57.000071		
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Freitas, Nick, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wolfe, William, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 92 Christendom Drive		Amount 17.50	
City State Zip Code Front Royal VA 22630	Transaction ID : F57.000072		
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: District:
Name of Federal Candidate Supported or Opposed by Expenditure: Trump, Donald, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee Wolfe, William, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 92 Christendom Drive		Amount 17.50	
City State Zip Code Front Royal VA 22630	Transaction ID : F57.000073		
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District:
Name of Federal Candidate Supported or Opposed by Expenditure: Gade, Daniel, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	72.50
(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, Inc.

Full Name (Last, First, Middle Initial) of Payee Wolfe, William, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 13 / 2020	
Mailing Address 92 Christendom Drive		Amount 21.00	
City Front Royal	State VA	Zip Code 22630	Transaction ID : F57.000074
Purpose of Expenditure Distribution of literature	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: VA District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: Cline, Ben, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 21.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

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

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

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	21.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> Independent Expenditures..... (carry total from last page forward to Line 7)	2392.25