

FEC FORM 5

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)

1. (a) Name of Individual, Organization or Corporation American Majority Action, Inc.		3. FEC Identification Number C 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) Kelly Amarin		

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.....

7. TOTAL INDEPENDENT EXPENDITURES

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM	SIGNATURE	DATE
Amarin, Kelly, , ,	<i>Amarin, Kelly, , ,</i>	04/01/2021

[Electronically Filed]

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

**SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee KELLER, JENNIFER, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 1231 Mourning Dove Court		Amount 37.50	
City Eagan	State MN	Zip Code 55123	Transaction ID : F57.000001
Purpose of Expenditure TEXT BANK	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4515.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee PORTER, COLIN, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 2616 ROCKY SPRINGS DRIVE		Amount 416.50	
City MARIETTA	State GA	Zip Code 30062	Transaction ID : F57.000002
Purpose of Expenditure PHONE BANK	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4515.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee SEGAL, JESSE, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 10401 CEDAR LAKE ROAD #209		Amount 81.00	
City HOPKINS	State MN	Zip Code 55305	Transaction ID : F57.000003
Purpose of Expenditure PHONE BANK	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4515.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	535.00
(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 DEJOURNETT, JENNIFER, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 18094 GLADSTONE BLVD N		Amount 691.00	
City MAPLE GROVE	State MN	Zip Code 55311	Transaction ID : F57.000004
Purpose of Expenditure DISTRIBUTION OF LITERATURE	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		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		4515.90	

Full Name (Last, First, Middle Initial) of Payee Leitner, Lonny, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 300 Grove Place		Amount 961.52	
City Edina	State MN	Zip Code 55343	Transaction ID : F57.000005
Purpose of Expenditure DISTRIBUTION OF LITERATURE	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		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		4515.90	

Full Name (Last, First, Middle Initial) of Payee DEJOURNETT, JENNIFER, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 18094 GLADSTONE BLVD N		Amount 71.19	
City MAPLE GROVE	State MN	Zip Code 55311	Transaction ID : F57.000006
Purpose of Expenditure LODGING	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		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		4515.90	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1723.71
(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 DEJOURNETT, JENNIFER, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 18094 GLADSTONE BLVD N		Amount 170.44	
City MAPLE GROVE	State MN	Zip Code 55311	Transaction ID : F57.000007
Purpose of Expenditure TRAVEL	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4515.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee DEJOURNETT, JENNIFER, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 18094 GLADSTONE BLVD N		Amount 246.09	
City MAPLE GROVE	State MN	Zip Code 55311	Transaction ID : F57.000008
Purpose of Expenditure MEAL	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4515.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee RUMBLE UP LLC		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 2101 L STREET NW		Amount 1256.81	
City WASHINGTON	State DC	Zip Code 20037	Transaction ID : F57.000009
Purpose of Expenditure TEXT MESSAGE SERVICE	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 4515.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1673.34
(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 FORMULA WIN LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 246 PURPLE MARTIN LANE		Amount 583.85	
City SUFFOLK	State VA	Zip Code 23435	Transaction ID : F57.000010
Purpose of Expenditure PRINTING	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: MN District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: QUALLS, KENDALL, , ,		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	
4515.90			

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		MM / DD / YYYY	
City	State	Zip Code	Amount
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)	
		2020	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination	
Mailing Address		MM / DD / YYYY	
City	State	Zip Code	Amount
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)	
		2020	

(a) SUBTOTAL of Itemized Independent Expenditures.....	583.85
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	4515.90