



**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Laudloff, Chloe, , ,		Date of Public Distribution/Dissemination 05 / 02 / 2020	
Mailing Address N9014 County Road GG		Amount 26.25	
City St. Cloud	State WI	Zip Code 53079	Transaction ID : F57.000001
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

Full Name (Last, First, Middle Initial) of Payee Campana, Gracia, , ,		Date of Public Distribution/Dissemination 05 / 02 / 2020	
Mailing Address 847 Remsen Avenue NW		Amount 45.00	
City Palm Bay	State FL	Zip Code 32907	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: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

Full Name (Last, First, Middle Initial) of Payee Harmeling, Hannah, , ,		Date of Public Distribution/Dissemination 05 / 02 / 2020	
Mailing Address		Amount 15.00	
City New Berlin	State WI	Zip Code 53151	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: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

(a) SUBTOTAL of Itemized Independent Expenditures.....	86.25
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee Campana, Mariah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2020	
Mailing Address 847 Remsen Avenue NW		Amount 15.00	
City Palm Bay	State FL	Zip Code 32907	Transaction ID : F57.000004
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 15.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

Full Name (Last, First, Middle Initial) of Payee Mucciolo, Nada, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2020	
Mailing Address W12308 Reeds Corners Road		Amount 15.00	
City Ripon	State WI	Zip Code 54971	Transaction ID : F57.000005
Purpose of Expenditure Phone bank	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 15.00		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

Full Name (Last, First, Middle Initial) of Payee Batzel, Nicole, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2020	
Mailing Address 107 South 6th Street		Amount 35.00	
City Cedar Grove	State WI	Zip Code 53013	Transaction ID : F57.000006
Purpose of Expenditure Peer to peer text messaging	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

(a) SUBTOTAL of Itemized Independent Expenditures.....	65.00
(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 Mason, Noah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2020	
Mailing Address		Amount 36.75	
City Sheboygan	State WI	Zip Code 53081	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000007
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI 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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special

Full Name (Last, First, Middle Initial) of Payee Laudolf, Sophia, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2020	
Mailing Address N9014 County Road GG		Amount 22.50	
City St Cloud	State WI	Zip Code 53079	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000008
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI 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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special

Full Name (Last, First, Middle Initial) of Payee Mucciolo, Tanya, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2020	
Mailing Address W12308 Reeds Corners Road		Amount 62.50	
City Ripon	State WI	Zip Code 54971	
Purpose of Expenditure Phone bank		Category/ Type	Transaction ID : F57.000009
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI 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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special

(a) SUBTOTAL of Itemized Independent Expenditures.....	121.75
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
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NAME OF FILER (In Full)  
American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee Urso, Tony, , ,		Date of Public Distribution/Dissemination 05 / 02 / 2020	
Mailing Address 1602 Fordem Avenue #210		Amount 82.50	
City Madison	State WI	Zip Code 53704	Transaction ID : F57.000010
Purpose of Expenditure Phone bank	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

Full Name (Last, First, Middle Initial) of Payee Batzel, Matt, , ,		Date of Public Distribution/Dissemination 05 / 02 / 2020	
Mailing Address 107 South 6th Street		Amount 222.53	
City Cedar Grove	State WI	Zip Code 53013	Transaction ID : F57.000011
Purpose of Expenditure Peer to peer text messaging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

Full Name (Last, First, Middle Initial) of Payee Nelson, Nate, , ,		Date of Public Distribution/Dissemination 05 / 02 / 2020	
Mailing Address 3977 Leonard Point Road		Amount 178.57	
City Oshkosh	State WI	Zip Code 54904	Transaction ID : F57.000012
Purpose of Expenditure Peer to peer text messaging	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

(a) SUBTOTAL of Itemized Independent Expenditures.....	483.60
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
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NAME OF FILER (In Full)  
American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee Pearce, Micah, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2020	
Mailing Address 3050 County Road OO		Amount 171.43	
City Sheboygan Falls	State WI	Zip Code 53085	Transaction ID : F57.000013
Purpose of Expenditure Phone bank	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, Tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

Full Name (Last, First, Middle Initial) of Payee RumbleUp LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 02 / 2020	
Mailing Address 2101 L Street NW		Amount 610.15	
City Washington	State DC	Zip Code 20037	Transaction ID : F57.000014
Purpose of Expenditure Text messaging service	Category/Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: Tiffany, tom, , ,		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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Special	

Full Name (Last, First, Middle Initial) of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY	
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) <input type="checkbox"/>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	781.58
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	1538.18