

# 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.....

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.

<b>TYPE OR PRINT NAME OF PERSON COMPLETING FORM</b>	<b>SIGNATURE</b>	<b>DATE</b>
Amorin, Kelly, , ,	Amorin, Kelly, , ,	11/16/2020
	<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 DICKINSON, LIZ, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 41317 PENCADER WAY		Amount 216.70	
City LEESBURG	State VA	Zip Code 20175	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 677.22		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, LIZ, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 41317 PENCADER WAY		Amount 216.70	
City LEESBURG	State VA	Zip Code 20175	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 677.22		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, Liz, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 41317 Pencader Way		Amount 216.70	
City Leesburg	State VA	Zip Code 20175	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 type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 677.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	650.10
(b) SUBTOTAL of Unitemized Independent Expenditures .....	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	

**SCHEDULE 5-E  
ITEMIZED INDEPENDENT EXPENDITURES**

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

Full Name (Last, First, Middle Initial) of Payee DICKINSON, LIZ, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 41317 PENCADER WAY		Amount 216.70	
City LESSBURG	State VA	Zip Code 20175	Transaction ID : F57.000004
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		677.22	

Full Name (Last, First, Middle Initial) of Payee DICKINSON, LIZ, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 41317 PENCADER WAY		Amount 216.70	
City LEESBURG	State VA	Zip Code 20175	Transaction ID : F57.000005
Purpose of Expenditure DISTRIBUTION OF LITERATURE	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: ANDREWS, ALISCIA, , ,		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		677.22	

Full Name (Last, First, Middle Initial) of Payee PEARCE, MICAH, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 3050 COUNTY ROAD OO		Amount 182.86	
City SHEBOYGAN FALLS	State WI	Zip Code 53085	Transaction ID : F57.000006
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 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		571.46	

(a) SUBTOTAL of Itemized Independent Expenditures.....	616.26
(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 PEARCE, MICAH, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 3050 COUNTY RAOD OO		Amount 182.86	
City	State	Zip Code	Transaction ID : F57.000007
SHEBOYGAN FALLS	WI	53085	
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 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		571.46	

Full Name (Last, First, Middle Initial) of Payee PEARCE, MICAH, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 3050 OUNTY ROAD OO		Amount 182.86	
City	State	Zip Code	Transaction ID : F57.000008
SHEBOYGAN FALLS	WI	53085	
Purpose of Expenditure TEXT BANK	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 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		571.46	

Full Name (Last, First, Middle Initial) of Payee PEARCE, MICAH, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 3050 COUNTY ROAD OO		Amount 182.86	
City	State	Zip Code	Transaction ID : F57.000009
SHEBOYGAN FALLS	WI	53085	
Purpose of Expenditure TEXT 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		571.46	

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	548.58
(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 PEARCE, MICAH, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 3050 COUNTY ROAD OO		Amount 182.86	
City SHEBOYGAN FALLS	State WI	Zip Code 53085	
Purpose of Expenditure TEXT BANK		Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
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 571.46		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee KWAPISZ, JOHN, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 9410 STANMORE PLACE		Amount 457.14	
City N CHESTERFIELD	State VA	Zip Code 23236	
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 1314.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee KWAPISZ, JOHN, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 9410 STANMORE PLACE		Amount 457.14	
City N CHESTERFIELD	State VA	Zip Code 23236	
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 1314.30		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	1097.14
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	
(c) <b>TOTAL</b> 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 KWAPISZ, JOHN, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 9410 STANMORE PLACE		Amount 457.14	
City N CHESTERFIELD	State VA	Zip Code 23236	Transaction ID : F57.000013
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		1314.30	

Full Name (Last, First, Middle Initial) of Payee KWAPISZ, JOHN, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 9410 STANMORE PLACE		Amount 75.32	
City N CHESTERFIELD	State VA	Zip Code 23236	Transaction ID : F57.000014
Purpose of Expenditure TRAVEL	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		75.32	

Full Name (Last, First, Middle Initial) of Payee KWAPISZ, JOHN, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 9410 STANMORE PLACE		Amount 75.32	
City N CHESTERFIELD	State VA	Zip Code 23236	Transaction ID : F57.000015
Purpose of Expenditure TRAVEL	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		75.32	

(a) SUBTOTAL of Itemized Independent Expenditures.....	607.78
(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 KWAPISZ, JOHN, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 9410 STANMORE PLACE		Amount 75.33	
City N CHESTERFIELD	State VA	Zip Code 23236	Transaction ID : F57.000016
Purpose of Expenditure TRAVEL	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		75.33	

Full Name (Last, First, Middle Initial) of Payee DONICA, MARGARETT, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 1504 OLD FARM ROAD		Amount 380.96	
City LYNCHBURG	State VA	Zip Code 24503	Transaction ID : F57.000017
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	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		1133.38	

Full Name (Last, First, Middle Initial) of Payee DONICA, MARGARETT, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 1504 OLD FARM ROAD		Amount 380.96	
City LYNCHBURG	State VA	Zip Code 24503	Transaction ID : F57.000018
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	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		1133.38	

(a) SUBTOTAL of Itemized Independent Expenditures.....	837.25
(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 DONICA, MARGARETT, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 1504 OLD FARM ROAD		Amount 380.96	
City LYNCHBURG	State VA	Zip Code 24503	Transaction ID : F57.000019
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 <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		1133.38	

Full Name (Last, First, Middle Initial) of Payee FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 457.14	
City FREDERICKSBURG	State VA	Zip Code 22408	Transaction ID : F57.000020
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	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		1314.30	

Full Name (Last, First, Middle Initial) of Payee FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 457.14	
City FREDERICKSBURG	State VA	Zip Code 22408	Transaction ID : F57.000021
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	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		1314.30	

(a) SUBTOTAL of Itemized Independent Expenditures.....	1295.24
(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 FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 457.14	
City FREDERICKSBURG	State VA	Zip Code 22408	
Purpose of Expenditure DISTRIBUTION OF LITERATURE		Category/ Type	Transaction ID : F57.000022
Name of Federal Candidate Supported or Opposed by Expenditure: ANDREWS, ALISCIA, , ,		Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President	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 2020 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 138.20	
City FREDERICKSBURG	State VA	Zip Code 22408	
Purpose of Expenditure DISTRIBUTION OF LITERATURE		Category/ Type	Transaction ID : F57.000023
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD, , ,		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
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify)	

Full Name (Last, First, Middle Initial) of Payee FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 35.65	
City FREDERICKSBURG	State VA	Zip Code 22408	
Purpose of Expenditure MEAL		Category/ Type	Transaction ID : F57.000024
Name of Federal Candidate Supported or Opposed by Expenditure: TRUMP, DONALD, , ,		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
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify)	

(a) SUBTOTAL of Itemized Independent Expenditures.....	630.99
(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 FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 138.20	
City FREDERICKSBURG	State VA	Zip Code 22408	Transaction ID : F57.000025
Purpose of Expenditure TRAVEL	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		165.42	

Full Name (Last, First, Middle Initial) of Payee FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 35.65	
City FREDERICKSBURG	State VA	Zip Code 22408	Transaction ID : F57.000026
Purpose of Expenditure MEAL	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		38.63	

Full Name (Last, First, Middle Initial) of Payee FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 138.20	
City FREDERICKSBURG	State VA	Zip Code 22408	Transaction ID : F57.000027
Purpose of Expenditure TRAVEL	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: ANDREWS, ALISCIA, , ,		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		138.20	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	312.05
(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 FITZGERALD, JESSICA, , ,		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 5116 BERCLAIR PLANTATION LANE		Amount 35.65	
City FREDERICKSBURG	State VA	Zip Code 22408	Transaction ID : F57.000028
Purpose of Expenditure MEAL	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: ANDREWS, ALISCIA, , ,		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		35.65	

Full Name (Last, First, Middle Initial) of Payee RUMBLE UP LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 2101 L STREET NW		Amount 2836.90	
City WASHINGTON	State DC	Zip Code 20037	Transaction ID : F57.000029
Purpose of Expenditure TEXT MESSAGE SERVICE	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		3208.82	

Full Name (Last, First, Middle Initial) of Payee MR. PRINT		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 501 EEAST MAIN STREET		Amount 121.68	
City PURCELLVILLE	State VA	Zip Code 20132	Transaction ID : F57.000030
Purpose of Expenditure PRINTING	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		398.07	

(a) SUBTOTAL of Itemized Independent Expenditures.....	2994.23
(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 MR. PRINT		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 501 EAST MAIN STREET		Amount 121.68	
City PURCELLVILLE	State VA	Zip Code 20132	Transaction ID : F57.000031
Purpose of Expenditure PRINTING	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		398.03	

Full Name (Last, First, Middle Initial) of Payee MR. PRINT		Date of Public Distribution/Dissemination MM / DD / YYYY 11 / 03 / 2020	
Mailing Address 501 EAST MAIN STREET		Amount 121.69	
City PURCELLVILLE	State VA	Zip Code 20132	Transaction ID : F57.000032
Purpose of Expenditure PRINTING	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President	Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: ANDREWS, ALISCIA, , ,		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		121.69	

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 State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought			

(a) SUBTOTAL of Itemized Independent Expenditures.....	▶	243.37
(b) SUBTOTAL of Unitemized Independent Expenditures .....	▶	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	▶	9832.99