

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)		

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 1490.18

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
Amorin, Kelly, , ,	Amorin, Kelly, , ,	05/08/2020

[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 Leclerc, Laura, , ,		Date of Public Distribution/Dissemination 05 / 07 / 2020	
Mailing Address W9152 Chickadee Drive		Amount 45.00	
City Glenbeulah	State WI	Zip Code 53023	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 187.50		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 05 / 07 / 2020	
Mailing Address W12308 Reeds Corners Road		Amount 37.50	
City Ripon	State WI	Zip Code 54971	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 172.50		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 05 / 07 / 2020	
Mailing Address N9014 County Road GG		Amount 52.50	
City St Cloud	State WI	Zip Code 53079	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 232.50		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.....	135.00
(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 Mucciolo, Tanya, , ,		Date of Public Distribution/Dissemination 05 / 07 / 2020	
Mailing Address W12308 Reeds Corners Road		Amount 75.00	
City Ripon	State WI	Zip Code 54971	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 362.50		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 Urso, Tony, , ,		Date of Public Distribution/Dissemination 05 / 07 / 2020	
Mailing Address 1602 Fordem Avenue #210		Amount 97.50	
City Madison	State WI	Zip Code 53704	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 506.25		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 / 07 / 2020	
Mailing Address 107 South 6th Street		Amount 222.53	
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 1335.18		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Runoff	

(a) SUBTOTAL of Itemized Independent Expenditures.....	395.03
(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 Nelson, Nate, , ,		Date of Public Distribution/Dissemination 05 / 07 / 2020	
Mailing Address 3977 Leonard Point Road		Amount 178.57	
City Oshkosh	State WI	Zip Code 54904	Transaction ID : F57.000007
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 Pearce, Micah, , ,		Date of Public Distribution/Dissemination 05 / 07 / 2020	
Mailing Address 3050 County Road OO		Amount 171.43	
City Sheboygan Falls	State WI	Zip Code 53085	Transaction ID : F57.000008
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 05 / 07 / 2020	
Mailing Address 2101 L Street NW		Amount 610.15	
City Washington	State DC	Zip Code 20037	Transaction ID : F57.000009
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	

(a) SUBTOTAL of Itemized Independent Expenditures.....	960.15
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures..... (carry total from last page forward to Line 7)	1490.18