

**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> <b>C90011891</b>
(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

**11** / **18** / **2020**

## 5. COVERING PERIOD:

FROM **10** / **11** / **2020**

THROUGH **10** / **26** / **2020**

6. TOTAL CONTRIBUTIONS.....

**.00**

7. TOTAL INDEPENDENT EXPENDITURES .....

**13109.10**

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

*[Electronically Filed]*

Amorin, Kelly, , ,

Amorin, Kelly, , ,

11/18/2020

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**PAGE 2 OF 8  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 107 S 6TH STREET

Amount

351.66

Transaction ID : F57.000001

Purpose of Expenditure  
Distribution of literatureCategory/  
Type

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

Trump, Donald, , ,

Calendar Year-To-Date Per Election  
for Office Sought

450.56

Disbursement For:

☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 107 S 6TH STREET

Amount

351.66

Transaction ID : F57.000002

Purpose of Expenditure  
Distribution of literatureCategory/  
Type

Office Sought:

☒ House

State: WI

☐ Senate

District: 03

☐ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

VAN ORDEN, DERRICK, , ,

Calendar Year-To-Date Per Election  
for Office Sought

450.56

Disbursement For:

☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 107 S 6TH STREET

Amount

177.50

Transaction ID : F57.000003

Purpose of Expenditure  
TRAVELCategory/  
Type

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TRUMP, DONALD, , ,

Calendar Year-To-Date Per Election  
for Office Sought

177.50

Disbursement For:

☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

880.82

(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**PAGE 3 OF 8  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 107 S 6TH STREET

Amount

28.44

Transaction ID : F57.000004

Purpose of Expenditure  
MEALCategory/  
Type

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TRUMP, DONALD, , ,

Calendar Year-To-Date Per Election  
for Office Sought

28.44

Disbursement For:

☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 107 S 6TH STREET

Amount

37.47

Transaction ID : F57.000005

Purpose of Expenditure  
POSTAGECategory/  
Type

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TRUMP, DONALD, , ,

Calendar Year-To-Date Per Election  
for Office Sought

37.47

Disbursement For:

☐ Primary☒ General☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 107 S 6TH STREET

Amount

25.00

Transaction ID : F57.000006

Purpose of Expenditure  
OFFICE EXPENSECategory/  
Type

Office Sought:

☐ House

State: \_\_\_\_\_

☐ Senate

District: \_\_\_\_\_

☒ President

Check One:

☒ Support☐ Oppose

Name of Federal Candidate Supported or Opposed by Expenditure:

TRUMP, DONALD, , ,

Calendar Year-To-Date Per Election  
for Office Sought

25.00

Disbursement For:

☐ Primary☒ General☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

90.91

(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**PAGE 4 OF 8  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2020

Mailing Address 107 S 6TH STREET

Amount

City	State	Zip Code
CEDAR GROVE	WI	53013

Amount
177.50

Transaction ID : F57.000007

Purpose of Expenditure  
TRAVELCategory/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	State: WI
	<input type="checkbox"/> Senate	District: 03
	<input type="checkbox"/> President	

Name of Federal Candidate Supported or Opposed by Expenditure:  
VAN ORDEN, DERRICK, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

177.50

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2020

Mailing Address 107 S 6TH STREET

Amount

City	State	Zip Code
CEDAR GROVE	WI	53015

Amount
28.44

Transaction ID : F57.000008

Purpose of Expenditure  
MEALCategory/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	State: WI
	<input type="checkbox"/> Senate	District: 03
	<input type="checkbox"/> President	

Name of Federal Candidate Supported or Opposed by Expenditure:  
VAN ORDEN, DERRICK, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

28.44

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2020

Mailing Address 107 S 6TH STREET

Amount

City	State	Zip Code
CEDAR GROVE	WI	53015

Amount
37.47

Transaction ID : F57.000009

Purpose of Expenditure  
POSTAGECategory/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	State: WI
	<input type="checkbox"/> Senate	District: 03
	<input type="checkbox"/> President	

Name of Federal Candidate Supported or Opposed by Expenditure:  
VAN ORDEN, DERRICK, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

37.47

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 243.41

(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**PAGE 5 OF 8  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2020

Mailing Address 107 S 6TH STREET

Amount

City	State	Zip Code
CEDAR GROVE	WI	53015

Amount
25.00

Transaction ID : F57.000010

Purpose of Expenditure  
OFFICE EXPENSECategory/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	State: WI
	<input type="checkbox"/> Senate	District: 03
	<input type="checkbox"/> President	

Name of Federal Candidate Supported or Opposed by Expenditure:  
VAN ORDEN, DERRICK, , ,Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

Amount
25.00

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

NELSON, NATE, , ,

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2020

Mailing Address 3977 LEONARD POINT ROAD

Amount

City	State	Zip Code
OSHKOSH	WI	54904

Amount
665.80

Transaction ID : F57.000011

Purpose of Expenditure  
PHONE BANKCategory/  
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: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

Amount
749.02

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

NELSON, NATE, , ,

Date of Public Distribution/Dissemination

M M M	/	D D D	/	Y Y Y Y Y Y
10		26		2020

Mailing Address 3977 LEONARD POINT ROAD

Amount

City	State	Zip Code
OSHKOSH	WI	54904

Amount
665.80

Transaction ID : F57.000012

Purpose of Expenditure  
PHONE BANKCategory/  
Type

Office Sought:	<input checked="" type="checkbox"/> House	State: WI
	<input type="checkbox"/> Senate	District: 03
	<input type="checkbox"/> President	

Name of Federal Candidate Supported or Opposed by Expenditure:  
VAN ORDEN, DERRICK, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

Amount
749.02

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

Amount
1356.60

(b) SUBTOTAL of Unitemized Independent Expenditures .....

Amount

(c) TOTAL Independent Expenditures.....▶  
(carry total from last page forward to Line 7)

Amount

**SCHEDULE 5-E**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 6 OF 8  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee  
ELLIS, SCOTT, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 334 MANCHESTER LANE

Amount

City State Zip Code  
HARTLAND WI 53029

286.81

Transaction ID : F57.000013

Purpose of Expenditure  
DISTRIBUTION OF LITERATURECategory/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
TRUMP, DONALD, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought 340.59Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee  
ELLIS, SCOTT, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 334 MANCHESTER LANE

Amount

City State Zip Code  
HARTLAND WI 53029

286.81

Transaction ID : F57.000014

Purpose of Expenditure  
DISTRIBUTION OF LITERATURECategory/  
TypeOffice Sought: ☒ House State: WI  
☐ Senate District: 03  
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
VAN ORDEN, DERRICK, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought 340.59Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶Full Name (Last, First, Middle Initial) of Payee  
EBBEN, JESSI, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y  
10 / 26 / 2020

Mailing Address 1305 OAKCREST DRIVE

Amount

City State Zip Code  
EAU CLAIRE WI 54701

1371.43

Transaction ID : F57.000015

Purpose of Expenditure  
DISTRIBUTION OF LITERATURECategory/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
TRUMP, DONALD, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought 1457.14Disbursement For: ☒ Primary ☐ General  
2020  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 1945.05

(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**PAGE 7 OF 8  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee

EBBEN, JESSI, , ,

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y  
10 / 26 / 2020

Mailing Address 1305 OAKCREST DRIVE

Amount

1371.43

Transaction ID : F57.000016

Purpose of Expenditure  
DISTRIBUTION OF LITERATURECategory/  
TypeOffice Sought: ☒ House State: WI  
☐ Senate District: 03  
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
VAN DERRICK, DERRICK, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

1457.14

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

RUMBLE UP LLC

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y  
10 / 26 / 2020

Mailing Address 2101 L STREET NW

Amount

4521.73

Transaction ID : F57.000017

Purpose of Expenditure  
TEXT MESSAGE SERVICECategory/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
TRUMP, DOANLD, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

5089.74

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

ELIXIR CREATIVE

Date of Public Distribution/Dissemination

M M / D D / Y Y Y Y Y  
10 / 26 / 2020

Mailing Address 10701 W NORTH AVENUE #207

Amount

1349.57

Transaction ID : F57.000018

Purpose of Expenditure  
PRINTINGCategory/  
TypeOffice Sought: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☒ PresidentName of Federal Candidate Supported or Opposed by Expenditure:  
TRUMP, DONALD, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election  
for Office Sought

1349.57

Disbursement For: ☐ Primary ☒ General  
2020  
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 7242.73

(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**

PAGE 8 OF 8  
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee  
ELIXIR CREATIVE

Date of Public Distribution/Dissemination

10 / 26 / 2020

Mailing Address 10701 W NORTH AVENUE #207

Amount

City State Zip Code  
WAUWATOSA WI 53226

1349.58

Transaction ID : F57.000019

Purpose of Expenditure  
PRINTING

Category/  
Type

Office Sought: ☒ House State: WI  
☐ Senate District: 03  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:  
VAN ORDEN, DERRICK, , ,

Check One: ☒ Support ☐ Oppose

Calendar Year-To-Date Per Election  
for Office Sought 1349.58

Disbursement For: ☐ Primary ☒ General  
2020 ☐ 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: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ Oppose

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For: ☐ Primary ☐ General  
☐ 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: ☐ House State: \_\_\_\_\_  
☐ Senate District: \_\_\_\_\_  
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ Oppose

Calendar Year-To-Date Per Election  
for Office Sought

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▶

(a) **SUBTOTAL** of Itemized Independent Expenditures.....▶ 1349.58

(b) **SUBTOTAL** of Unitemized Independent Expenditures .....▶

(c) **TOTAL** Independent Expenditures.....▶ 13109.10  
(carry total from last page forward to Line 7)