

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

2845.72

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, , ,

11/17/2020

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 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

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

PONIEWAZ, GLEN, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 3350 S PIONEER ROAD

Amount

Amount
81.00

City

State

Zip Code

CONOVER

WI

54519

Transaction ID : F57.000001

Purpose of Expenditure
Distribution of literatureCategory/
Type

Office Sought:

☐

House

State: _____

☐

Senate

District: _____

☒

President

Check One:

☒

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Trump, Donald, , ,Calendar Year-To-Date Per Election
for Office Sought

81.00

Disbursement For:
2020☐

Primary

☒

General

☐ Other (specify) ▶

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

PONIEWAZ, GLEN, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 3350 S PIONEER ROAD

Amount

Amount
81.00

City

State

Zip Code

CONOVER

WI

54519

Transaction ID : F57.000002

Purpose of Expenditure
Distribution of literatureCategory/
Type

Office Sought:

☒

House

State: WI

☐

Senate

District: 03

☐

President

Check One:

☒

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
VAN ORDEN, DERRICK, , ,Calendar Year-To-Date Per Election
for Office Sought

81.00

Disbursement For:
2020☐

Primary

☒

General

☐ Other (specify) ▶

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

HARBACH, IRIS, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 3615 LAKESHORE ROAD

Amount

Amount
73.50

City

State

Zip Code

SHEBOYGAN

WI

53083

Transaction ID : F57.000003

Purpose of Expenditure
Distribution of literatureCategory/
Type

Office Sought:

☐

House

State: _____

☐

Senate

District: _____

☒

President

Check One:

☒

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
Trump, Donald, , ,Calendar Year-To-Date Per Election
for Office Sought

73.50

Disbursement For:
2020☐

Primary

☒

General

☐ Other (specify) ▶

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

235.50

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 3 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

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

HARBACH, IRIS, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 3615 LAKESHORE ROAD

Amount

City State Zip Code
SHEBOYGAN WI 53083Amount
73.50

Transaction ID : F57.000004

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

73.50

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

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

BENNETT, JAKE, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 700 OVERLAND TRAIL

Amount

City State Zip Code
GRAFTON WI 53024Amount
21.00

Transaction ID : F57.000005

Purpose of Expenditure
TEXT BANKCategory/
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

21.00

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

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

BENNETT, JAKE, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 700 OVERLAND TRAIL

Amount

City State Zip Code
GRAFTON WI 53024Amount
21.00

Transaction ID : F57.000006

Purpose of Expenditure
TEXT BANKCategory/
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

21.00

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

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

115.50

(b) SUBTOTAL of Unitemized Independent Expenditures▶

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 4 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

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

HANSON, JOHN, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 1906 SCHOFIELD AVENUE

Amount

City	State	Zip Code
WESTON	WI	54476

Amount
67.50

Transaction ID : F57.000007

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
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

67.50

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

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

HANSON, JOHN, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 1906 SCHOFIELD AVENUE

Amount

City	State	Zip Code
WESTON	WI	54476

Amount
67.50

Transaction ID : F57.000008

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
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

67.50

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

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

CAMPANA, MARIAH, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 3435 HIELD ROAD

Amount

City	State	Zip Code
W MELBOURNE	FL	32904

Amount
14.00

Transaction ID : F57.000009

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

14.00

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

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 149.00

(b) SUBTOTAL of Unitemized Independent Expenditures

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 5 OF 11
FOR LINE 7 OF FORM 5

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
10 / 10 / 2020

Mailing Address 3435 HIELD ROAD

Amount

City State Zip Code
W MELBOURNE FL 32904Amount
14.00

Transaction ID : F57.000010

Purpose of Expenditure
PHONE BANKCategory/
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

14.00

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

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

URSO, TONY, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 639 EAGLEWATCH DRIVE

Amount

City State Zip Code
DEFOREST WI 53532Amount
26.25

Transaction ID : F57.000011

Purpose of Expenditure
PHONE BANKCategory/
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

26.25

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

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

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 107 SOUTH 6TH STREET

Amount

City State Zip Code
CEDAR GROVE WI 53013Amount
98.90

Transaction ID : F57.000012

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

98.90

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

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 139.15

(b) SUBTOTAL of Unitemized Independent Expenditures

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 6 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

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

URSO, TONY, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 639 EAGLEWATCH DRIVE

Amount

City State Zip Code
DEFOREST WI 53532

26.25

Transaction ID : F57.000013

Purpose of Expenditure
PHONE BANKCategory/
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 26.25Disbursement For: ☐ Primary ☒ General
2020
☐ Other (specify) ▶

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

BATZEL, MATT, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 107 SOUTH 6TH STREET

Amount

City State Zip Code
CEDAR GROVE WI 53013

98.90

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 98.90Disbursement For: ☐ Primary ☒ General
2020
☐ Other (specify) ▶

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

NELSON, NATE, , ,

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 3977 LEONARD POINT ROAD

Amount

City State Zip Code
OSHKOSH WI 54904

83.22

Transaction ID : F57.000015

Purpose of Expenditure
PHONE BANKCategory/
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 83.22Disbursement For: ☐ Primary ☒ General
2020
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 208.37

(b) SUBTOTAL of Unitemized Independent Expenditures

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 7 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

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		10		2020

Mailing Address 3977 LEONARD POINT ROAD

Amount

83.22

Transaction ID : F57.000016

Purpose of Expenditure
PHONE BANKCategory/
Type

Office Sought:

☒

House

State: WI

☐

Senate

District: 03

☐

President

Check One:

☒

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
VAN ORDEN, DERRICK, , ,Calendar Year-To-Date Per Election
for Office Sought

83.22

Disbursement For:
2020
☐ Other (specify) ▶☐

Primary

☒

General

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

ELLIS, SCOTT, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 334 MANCHESTER LANE

Amount

53.78

Transaction ID : F57.000017

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
Type

Office Sought:

☐

House

State: _____

☐

Senate

District: _____

☒

President

Check One:

☐

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD, , ,Calendar Year-To-Date Per Election
for Office Sought

53.78

Disbursement For:
2020
☐ Other (specify) ▶☐

Primary

☒

General

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

ELLIS, SCOTT, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 334 MANCHESTER LANE

Amount

53.78

Transaction ID : F57.000018

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
Type

Office Sought:

☒

House

State: WI

☐

Senate

District: 03

☐

President

Check One:

☒

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
VAN ORDEN, DERRICK, , ,Calendar Year-To-Date Per Election
for Office Sought

53.78

Disbursement For:
2020
☐ Other (specify) ▶☐

Primary

☒

General

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

190.78

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 8 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

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

PEARCE, MICAH, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 3050 COUNTY ROAD OO

Amount

City State Zip Code
SHEBOYGAN FALLS WI 53085

57.14

Transaction ID : F57.000019

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

57.14

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

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

PEARCE, MICAH, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 3050 COUNTY ROAD OO

Amount

City State Zip Code
SHEBOYGAN FALLS WI 53085

57.14

Transaction ID : F57.000020

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

57.14

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

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

STORMS, JASON, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 955 COUNTY C

Amount

City State Zip Code
GRAFTON WI 53024

107.14

Transaction ID : F57.000021

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

107.14

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

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 221.42

(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 9 OF 11

FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

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

STORMS, JASON, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 955 COUNTY C

Amount

107.14

Transaction ID : F57.000022

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
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 ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

107.14

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

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

MUCCIOLO, TANYA, , ,

Date of Public Distribution/Dissemination

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

Mailing Address W12308 REEDS CORNERS ROAD

Amount

85.71

Transaction ID : F57.000023

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
Type
 Office Sought: ☐ House State: _____
☐ Senate District: _____
☒ President
Name of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD, , ,Check One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

85.71

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

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

MUCCIOLO, TANYA, , ,

Date of Public Distribution/Dissemination

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

Mailing Address W12308 REEDS CORNERS ROAD

Amount

85.71

Transaction ID : F57.000024

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
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 ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

85.71

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

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 278.56

(b) SUBTOTAL of Unitemized Independent Expenditures

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

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 10 OF 11
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 M	/	D D D	/	Y Y Y Y Y Y
10		10		2020

Mailing Address 1305 OAKCREST DRIVE

Amount

85.71

Transaction ID : F57.000025

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
Type

Office Sought:

☐

House

State: _____

☐

Senate

District: _____

☒

President

Check One:

☒

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD, , ,Calendar Year-To-Date Per Election
for Office Sought

85.71

Disbursement For:
2020☐

Primary

☒

General

☐ Other (specify) ▶

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

EBBEN, JESSI, , ,

Date of Public Distribution/Dissemination

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

Mailing Address 1305 OAKCREST DRIVE

Amount

85.71

Transaction ID : F57.000026

Purpose of Expenditure
DISTRIBUTION OF LITERATURECategory/
Type

Office Sought:

☒

House

State: WI

☐

Senate

District: 03

☐

President

Check One:

☒

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
VAN ORDEN, DERRICK, , ,Calendar Year-To-Date Per Election
for Office Sought

85.71

Disbursement For:
2020☐

Primary

☒

General

☐ Other (specify) ▶

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

RUMBLE UP LLC

Date of Public Distribution/Dissemination

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

Mailing Address 2101 L STREET NW

Amount

568.01

Transaction ID : F57.000027

Purpose of Expenditure
TEXT MESSAGE SERVICECategory/
Type

Office Sought:

☐

House

State: _____

☐

Senate

District: _____

☒

President

Check One:

☒

Support

☐ OpposeName of Federal Candidate Supported or Opposed by Expenditure:
TRUMP, DONALD, , ,Calendar Year-To-Date Per Election
for Office Sought

568.01

Disbursement For:
2020☐

Primary

☒

General

☐ Other (specify) ▶

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

739.43

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

(carry total from last page forward to Line 7)

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURESPAGE 11 OF 11
FOR LINE 7 OF FORM 5

NAME OF FILER (In Full)

American Majority Action, Inc.

Full Name (Last, First, Middle Initial) of Payee
RUMBLE UP LLC

Date of Public Distribution/Dissemination

MM / DD / YYYY
10 / 10 / 2020

Mailing Address 2101 L STREET NW

Amount

City State Zip Code
WASHINGTON DC 20037

568.01

Transaction ID : F57.000028

Purpose of Expenditure
TEXT MESSAGE SERVICECategory/
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

568.01

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

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/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

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/
TypeOffice Sought: ☐ House State: _____
☐ Senate District: _____
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office SoughtDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶ 568.01

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶ 2845.72
(carry total from last page forward to Line 7)