

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICAN LIBERTY FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2023"/>		30752.62
(b) Cash on Hand at Beginning of Reporting Period.....	30752.62	
(c) Total Receipts (from Line 19)	110376.24	110376.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	141128.86	141128.86
7. Total Disbursements (from Line 31).....	120480.19	120480.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	20648.67	20648.67
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	1800.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

AMERICAN LIBERTY FUND

Report Covering the Period: From: 01 / 01 / 2023 To: 06 / 30 / 2023

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	101782.80	101782.80
(ii) Unitemized	8593.44	8593.44
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	110376.24	110376.24
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	110376.24	110376.24
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	110376.24	110376.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	110376.24	110376.24

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	120427.49	120427.49
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	120427.49	120427.49
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	52.70	52.70
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	52.70	52.70
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	120480.19	120480.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	120480.19	120480.19

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	110376.24	110376.24
34. Total Contribution Refunds (from Line 28(d))	52.70	52.70
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	110323.54	110323.54
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	120427.49	120427.49
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	120427.49	120427.49

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

A. FARRELL, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1936 LARCHMONT ROAD
 City HOUSTON State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESMED Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2023
Transaction ID : A-48963
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

B. FARRELL, PETER, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1936 LARCHMONT ROAD
 City HOUSTON State TX Zip Code 77019
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RESMED Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 13 / 2023
Transaction ID : A-48952
 Amount of Each Receipt this Period
 2000.00
 Memo Item
 CONTRIBUTION

C. HARPER, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 478 EXPERIMENT FARM ROAD
 City MONROEVILLE State AL Zip Code 36460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 313.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 05 / 2023
Transaction ID : A-48985
 Amount of Each Receipt this Period
 156.56
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	4156.56
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 21
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

A. HARPER, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 478 EXPERIMENT FARM ROAD

City MONROEVILLE	State AL	Zip Code 36460
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
469.68

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	05	/	2023

Transaction ID : A-48781

Amount of Each Receipt this Period
156.56

Memo Item
CONTRIBUTION

B. HARPER, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 478 EXPERIMENT FARM ROAD

City MONROEVILLE	State AL	Zip Code 36460
---------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
626.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	05	/	2023

Transaction ID : A-48770

Amount of Each Receipt this Period
156.56

Memo Item
CONTRIBUTION

C. HARPER, JUDY, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 478 EXPERIMENT FARM ROAD

City MONROEVILLE	State AL	Zip Code 36460
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) RETIRED	Occupation (for Individual) RETIRED
--	--

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
782.80

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	05	/	2023

Transaction ID : A-48759

Amount of Each Receipt this Period
156.56

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	469.68
TOTAL This Period (last page this line number only).....	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 21
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

A. HARPER, JUDY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 478 EXPERIMENT FARM ROAD
 City MONROEVILLE State AL Zip Code 36460
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 939.36

Date of Receipt 06 / 05 / 2023
Transaction ID : A-48728
 Amount of Each Receipt this Period 156.56
 Memo Item CONTRIBUTION

B. TOPPER, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 TREASURE PLACE
 City JUPITER State FL Zip Code 33469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 01 / 07 / 2023
Transaction ID : A-48997
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

C. TOPPER, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 TREASURE PLACE
 City JUPITER State FL Zip Code 33469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 62000.00

Date of Receipt 02 / 23 / 2023
Transaction ID : A-49046
 Amount of Each Receipt this Period 12000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	62156.56
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:	PAGE 9 OF 21
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

A. TOPPER, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 TREASURE PLACE
 City JUPITER State FL Zip Code 33469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 77000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2023
Transaction ID : A-49001
 Amount of Each Receipt this Period
 15000.00
 Memo Item
CONTRIBUTION

B. TOPPER, LEWIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 TREASURE PLACE
 City JUPITER State FL Zip Code 33469
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF EMPLOYED Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 97000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 12 / 2023
Transaction ID : A-49002
 Amount of Each Receipt this Period
 20000.00
 Memo Item

C.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	35000.00
TOTAL This Period (last page this line number only).....▶	101782.80

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

A. AMERICAN AIRLINES

Full Name (Last, First, Middle Initial)

Mailing Address 7645 E 63RD ST
STE 600

City TULSA State OK Zip Code 74133

Purpose of Disbursement TRAVEL-AIRFARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
02 / 13 / 2023

FEC Identification Number: C

Transaction ID : B-49027

Amount of Each Disbursement this Period: 1423.40

Memo Item

B. CASTORANI, JOHN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 388 E. MAIN ST

City ORANGE State NJ Zip Code 22960

Purpose of Disbursement TRAVEL EXPENSE-AIR FARE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
05 / 01 / 2023

FEC Identification Number: C

Transaction ID : B-49009

Amount of Each Disbursement this Period: 735.60

Memo Item

C. COMMONSENSE MEDIA

Full Name (Last, First, Middle Initial)

Mailing Address 5302 COLEWAY DRIVE

City HOLLY SPRINGS State NC Zip Code 27540

Purpose of Disbursement BUS TRIP SPONSORSHIP NON ELECTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
01 / 24 / 2023

FEC Identification Number: C

Transaction ID : B-49024

Amount of Each Disbursement this Period: 30000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 32159.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

Full Name (Last, First, Middle Initial)

A. DISRUPTOR ROADIO

Mailing Address 5302 COLEWAY DRIVE

City HOLLY SPRINGS State NC Zip Code 27540

Purpose of Disbursement
BUS TOUR SPONSORSHIP NON ELECTION

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 12 / 2023

FEC Identification Number

C []

Transaction ID : B-49008

Amount of Each Disbursement this Period

[] 10000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. EMBASSY SUITES

Mailing Address 4350 PGA BOULEVARD

City PALM BEACH GARDENS State FL Zip Code 33410

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2023

FEC Identification Number

C []

Transaction ID : B-49029

Amount of Each Disbursement this Period

[] 386.48

Memo Item

Full Name (Last, First, Middle Initial)

C. EMBASSY SUITES

Mailing Address 4350 PGA BOULEVARD

City PALM BEACH GARDENS State FL Zip Code 33410

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 21 / 2023

FEC Identification Number

C []

Transaction ID : B-49030

Amount of Each Disbursement this Period

[] 386.48

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[] 10772.96

[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

Full Name (Last, First, Middle Initial)

A. EMBASSY SUITES

Mailing Address 4350 PGA BOULEVARD

City
PALM BEACH GARDENS

State
FL

Zip Code
33410

Purpose of Disbursement
TRAVEL - LODGING

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	1		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-49031

Amount of Each Disbursement this Period

[REDACTED] 485.84

Memo Item

Full Name (Last, First, Middle Initial)

B. LAW OFFICE OF MICHAEL GEORGE

Mailing Address 12225 AMOS LANE

City
FREDERICKSBURG

State
VA

Zip Code
22407

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	9		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-49018

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LAW OFFICE OF MICHAEL GEORGE

Mailing Address 12225 AMOS LANE

City
FREDERICKSBURG

State
VA

Zip Code
22407

Purpose of Disbursement
LEGAL FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	3

FEC Identification Number

C [REDACTED]

Transaction ID : B-49017

Amount of Each Disbursement this Period

[REDACTED] 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

[REDACTED] 10485.84

[REDACTED]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

A. LENDZION, NORMAN, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 14196 SW 8TH AVE

City Ocala State FL Zip Code 34473

Purpose of Disbursement VOICE OVERS PROMOTIONAL ADS

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 02 / 2023

FEC Identification Number: C

Transaction ID : B-49019

Amount of Each Disbursement this Period: 5500.00

Memo Item

B. LOOMER, LAURA, , ,

Full Name (Last, First, Middle Initial)

Mailing Address 423 CR 466 WEST

City Lady Lake State FL Zip Code 32159

Purpose of Disbursement POLITICAL ADVERTISING NON ELECTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2023

FEC Identification Number: C

Transaction ID : B-49012

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. MEDIA BRIDGE LLC

Full Name (Last, First, Middle Initial)

Mailing Address 8111 SOUTH US HIGHWAY 75 NORTH

City Sherman State TX Zip Code 75091

Purpose of Disbursement AD PRODUCTION NON ELECTION

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 02 / 13 / 2023

FEC Identification Number: C

Transaction ID : B-49016

Amount of Each Disbursement this Period: 10000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

17000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

Form for line numbers 21b-30b with checkboxes. 21b is checked.

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

Form A: MEDIA BRIDGE LLC. Includes fields for Full Name, Mailing Address, City (SHERMAN), State (TX), Zip Code (75091), Purpose of Disbursement (AD PRODUCTION/BOICE OVER FEES NON ELECTION), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (04/28/2023), FEC Identification Number (C), Transaction ID (B-49015), and Amount of Each Disbursement (16000.00).

Form B: MEDIA BRIDGE LLC. Includes fields for Full Name, Mailing Address, City (SHERMAN), State (TX), Zip Code (75091), Purpose of Disbursement (AD PRODUCTION/BOICE OVER FEES NON ELECTION), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (05/31/2023), FEC Identification Number (C), Transaction ID (B-49014), and Amount of Each Disbursement (8500.00).

Form C: PAULA Y. EDWARDS, CPA, MST, LLP. Includes fields for Full Name, Mailing Address (1629 K STREET NW SUITE 300), City (WASHINGTON), State (DC), Zip Code (20006), Purpose of Disbursement (ACCOUNTING SERVICES), Candidate Name, Office Sought, Disbursement For, Date of Disbursement (01/04/2023), FEC Identification Number (C), Transaction ID (B-49026), and Amount of Each Disbursement (2600.00).

SUBTOTAL of Disbursements This Page (optional) 27100.00
TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

Full Name (Last, First, Middle Initial) A. PAULA Y. EDWARDS, CPA, MST, LLP		Date of Disbursement MM / DD / YYYY 02 / 01 / 2023
Mailing Address 1629 K STREET NW SUITE 300		FEC Identification Number C [] Transaction ID : B-49020 Amount of Each Disbursement this Period [] 2000.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PAULA Y. EDWARDS, CPA, MST, LLP		Date of Disbursement MM / DD / YYYY 03 / 02 / 2023
Mailing Address 1629 K STREET NW SUITE 300		FEC Identification Number C [] Transaction ID : B-49021 Amount of Each Disbursement this Period [] 1600.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PAULA Y. EDWARDS, CPA, MST, LLP		Date of Disbursement MM / DD / YYYY 04 / 03 / 2023
Mailing Address 1629 K STREET NW SUITE 300		FEC Identification Number C [] Transaction ID : B-49022 Amount of Each Disbursement this Period [] 1500.00
City WASHINGTON	State DC	Zip Code 20006
Purpose of Disbursement ACCOUNTING SERVICES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 5100.00
TOTAL This Period (last page this line number only).....▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

Full Name (Last, First, Middle Initial)
A. PAULA Y. EDWARDS, CPA, MST, LLP

Date of Disbursement: MM / DD / YYYY
06 / 30 / 2023

Mailing Address: 1629 K STREET NW
SUITE 300

City: WASHINGTON State: DC Zip Code: 20006

Purpose of Disbursement: ACCOUNTING SERVICES

Candidate Name: _____

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C**

Transaction ID : **B-49023**

Amount of Each Disbursement this Period: 5000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. REVV FUNDRAISING PLATFORM

Date of Disbursement: MM / DD / YYYY
02 / 28 / 2023

Mailing Address: 1101 K STREET
FLOOR 8

City: WASHINGTON State: DC Zip Code: 20005

Purpose of Disbursement: MERCHANT FEES/AGENCY FEES

Candidate Name: _____

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C**

Transaction ID : **B-49052**

Amount of Each Disbursement this Period: 9968.67

Memo Item

Full Name (Last, First, Middle Initial)
C. REVV FUNDRAISING PLATFORM

Date of Disbursement: MM / DD / YYYY
03 / 31 / 2023

Mailing Address: 1101 K STREET
FLOOR 8

City: WASHINGTON State: DC Zip Code: 20005

Purpose of Disbursement: MERCHANT FEES/AGENCY FEES

Candidate Name: _____

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

FEC Identification Number: **C**

Transaction ID : **B-49051**

Amount of Each Disbursement this Period: 250.03

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 15218.70

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

Full Name (Last, First, Middle Initial)

A. REVV FUNDRAISING PLATFORM

Mailing Address 1101 K STREET
FLOOR 8

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
MERCHANT FEES/AGENCY FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
04 / 30 / 2023

FEC Identification Number

C

Transaction ID : B-49050

Amount of Each Disbursement this Period

234.58

Memo Item

Full Name (Last, First, Middle Initial)

B. REVV FUNDRAISING PLATFORM

Mailing Address 1101 K STREET
FLOOR 8

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
MERCHANT FEES/AGENCY FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
05 / 31 / 2023

FEC Identification Number

C

Transaction ID : B-49049

Amount of Each Disbursement this Period

370.77

Memo Item

Full Name (Last, First, Middle Initial)

C. REVV FUNDRAISING PLATFORM

Mailing Address 1101 K STREET
FLOOR 8

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
MERCHANT FEES/AGENCY FEES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
06 / 30 / 2023

FEC Identification Number

C

Transaction ID : B-49048

Amount of Each Disbursement this Period

479.84

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

1085.19

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

Full Name (Last, First, Middle Initial) A. TONY VANDERWAAL PRODUCTIONS		Date of Disbursement MM / DD / YYYY 01 / 06 / 2023
Mailing Address 23632 SIRUS CIRCLE		FEC Identification Number C [] Transaction ID : B-49006 Amount of Each Disbursement this Period [] 600.00
City MURRIETA	State CA	Zip Code 92562
Purpose of Disbursement VOICE OVERS FOR ADS NON ELECTION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. TONY VANDERWAAL PRODUCTIONS		Date of Disbursement MM / DD / YYYY 01 / 06 / 2023
Mailing Address 23632 SIRUS CIRCLE		FEC Identification Number C [] Transaction ID : B-49007 Amount of Each Disbursement this Period [] 300.00
City MURRIETA	State CA	Zip Code 92562
Purpose of Disbursement VOICE OVERS FOR ADS NON ELECTION		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. TRUIST		Date of Disbursement MM / DD / YYYY 03 / 21 / 2023
Mailing Address 2201 WISCONSIN AVE NW		FEC Identification Number C [] Transaction ID : B-49035 Amount of Each Disbursement this Period [] 69.00
City WASHINGTON	State DC	Zip Code 20007
Purpose of Disbursement BANK FEES		Category/ Type []
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[] 969.00
TOTAL This Period (last page this line number only).....▶	[]

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

Full Name (Last, First, Middle Initial)

A. TRUIST

Mailing Address 2201 WISCONSIN AVE NW

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	1		2	0	2	3

FEC Identification Number

C []

Transaction ID : B-49036

Amount of Each Disbursement this Period

[] 35.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TRUIST

Mailing Address 2201 WISCONSIN AVE NW

City
WASHINGTON

State
DC

Zip Code
20007

Purpose of Disbursement
BANK FEES

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	1		2	0	2	3

FEC Identification Number

C []

Transaction ID : B-49037

Amount of Each Disbursement this Period

[] 67.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C []

Amount of Each Disbursement this Period

[]

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

[] 102.00

TOTAL This Period (last page this line number only)..... ▶

[] 119992.69

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 20 OF 21
	FOR LINE NUMBER: (check only one)
	<input checked="" type="checkbox"/> 9
	<input type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor FEDERAL ELECTION COMMISSION			Nature of Debt (Purpose): REFUND OWED FROM OVERPAYMENT
Mailing Address 1050 FIRST STREET NORTHEAST			
City WASHINGTON	State DC	Zip Code 20463	

Outstanding Balance Beginning This Period		Transaction ID : D-23358	
1800.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1800.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional)..... ▶	1800.00
2) TOTALS This Period (last page this line number only)..... ▶	1800.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	1800.00

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 21 OF 21
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor TONY VANDERWAAL PRODUCTIONS			Nature of Debt (Purpose): VOICE OVERS FOR ADS
Mailing Address 23632 SIRUS CIRCLE			
City MURRIETA	State CA	Zip Code 92562	

Outstanding Balance Beginning This Period		Transaction ID : D-43720	
600.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	600.00	0.00	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) SUBTOTALS This Period This Page (optional).....▶	0.00
2) TOTALS This Period (last page this line number only).....▶	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)▶	