24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

FOR				PAGE 1 OF 1 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full) American Liberty Fund				ENTIFICATION NUMBER ▼	
^	.merican Liberty Fund		Cc	00623421	
Check if 24-hour report 48-hour report New report Amends report filed on 08 / 04 / 2020					
	Full Name of Payee Facebook		M = M /	Distribution/Dissemination	
	Mailing Address 1 Hacker Way		08 Amount	03 2020	
	City State	Zip Code		1800.00	
	Menlo Park CA	94025	Transaction ID Date of Disburs		
	Purpose of Expenditure Digital Advertising	Category/ Type 004	08	03 / 2020	
	Name of Federal Candidate	Support	Office Sought:	House District: 19	
	DONALDS, BYRON, , ,	Oppose	President	Senate State: FL	
	Calendar Year-To-Date Per Election for Office Sought	5400.00	Disbursement For: 2020 Other (spec	➤ Primary General cify) ►	
	Full Name of Payee		Date of Public	Distribution/Dissemination	
	Mailing Address		Amount		
	City State	Zip Code			
	Purpose of Expenditure	Category/ Type	Date of Disburs	sement or Obligation	
	Name of Federal Candidate	Support	Office Sought:	House District:	
	Calendar Year-To-Date Per Election for Office Sought	Орросс	Disbursement For: Other (spe	Senate State: Primary General acify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
	(c) TOTAL Independent Expenditures)	1800.00	
	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 (if the reporting entity is not a political party committee) any political party committee or its agent.				
	Edwards, Paula, , , [Electron	nically Filed] Date	08 05	2020	
	Signature				