24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)		PAGE 1 OF 7 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
American Liberty Fund		C C00623421			
Check if 24-hour report 48-hour report New report	ort Amends report fil	ed on Man / Dab / Yayaya			
Full Name of Payee Facebook		Date of Public Distribution/Dissemination			
		09 28 2020			
Mailing Address 1 Hacker Way		Amount			
City State	City State Zip Code				
Menlo Park CA	94025	Transaction ID : SE.5115 Date of Disbursement or Obligation			
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020	Category/ Type 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support Of	fice Sought:			
LOOMER, LAURA, , ,	Oppose	President Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought	18500.00 Dis	sbursement For: Primary General Other (specify) Other			
Full Name of Payee	·	Date of Public Distribution/Dissemination			
Facebook		09 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1 Hacker Way		Amount			
City State	Zip Code	5000.00			
Menlo Park CA	94025	Transaction ID : SE.5118 Date of Disbursement or Obligation			
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020	Category/ Type 004	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	x Support Of	fice Sought: 🗶 House District:02			
BOEBERT, LAUREN, , ,	Oppose	President Senate State: CO			
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary General Other (specify) Other			
(a) SUBTOTAL of Itemized Independent Expenditures	·····	23500.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	······				
(c) TOTAL Independent Expenditures	·······				
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.					
Edwards, Paula, , , [Electroni Signature	cally Filed] Date	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 7 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
American Liberty Fund	C C00623421			
Check if 24-hour report 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y			
Full Name of Payee Da	te of Public Distribution/Dissemination			
Facebook	M M / D D / Y Y Y Y Y Y Y 2020			
Mailing Address 1 Hacker Way	Amount			
City State Zip Code	8000.00			
Menlo Park CA 94025 Tra	Transaction ID : SE.5119 Date of Disbursement or Obligation			
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020 Category/ Type 004	09 / 28 / 2020			
Name of Federal Candidate X Support Office Sou	ught: X House District: 01			
SHEDD, TIFFANY, , , Oppose Pres	sident Senate State: AZ			
Calendar Year-To-Date Per Election for Office Sought Disbursem 2020	nent For: Primary General Other (specify)			
	ate of Public Distribution/Dissemination			
Facebook	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 1 Hacker Way	nount			
City State Zip Code	8000.00			
Da	nsaction ID : SE.5120 tte of Disbursement or Obligation			
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020 Category/ Type 004	09 / 28 / 2020			
Name of Federal Candidate X Support Office Soil	ught: 🗶 House District:03			
RODIMER DAN	sident Senate State: NV			
Calendar Year-To-Date Per Election for Office Sought Disbursen 2020	nent For:			
(a) SUBTOTAL of Itemized Independent Expenditures	16000.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(4) 333 10112 31 3110111203 111055112011 214511201120	7 7 1			
(c) TOTAL Independent Expenditures	1 7 1 7 1 7			
Under penalty of perjury I certify that the independent expenditures reported herein were not made i with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or party committee) any political party committee or its agent.				
Edwards, Paula, , , [Electronically Filed] Date 09	30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 7 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
American Liberty Fund	C C00623421			
Check if 24-hour report 48-hour report New report Amends report f	iled on Mam / Dad / Yayayay			
Full Name of Payee Media Bridge LLC	Date of Public Distribution/Dissemination			
Mailing Address 200 Lake Front Drive, #200	08 14 2020 Amount			
City State Zip Code	1500.00			
Mineral VA 23117	Transaction ID : SE.5121 Date of Disbursement or Obligation			
Purpose of Expenditure Ad Production Category/ Type 004	08			
Name of Federal Candidate Support O	ffice Sought: House District: 03			
BOEBERT, LAUREN, , , Oppose	President Senate State: CO			
Calcinal Ical Io Date	isbursement For: Primary ☐ Primary ☐ General ☐ Other (specify) ☐			
Full Name of Payee	Date of Public Distribution/Dissemination			
Media Bridge LLC	09 28 2020			
Mailing Address 200 Lake Front Drive, #200	Amount			
City State Zip Code	8000.00			
Mineral VA 23117	Transaction ID : SE.5116 Date of Disbursement or Obligation			
Purpose of Expenditure Ad Production Category/ Type 004	10 / 01 / 2020			
Name of Federal Candidate Support C	office Sought: 🗶 House District: 21			
LOOMER, LAURA, , , Oppose	President Senate State: FL			
	isbursement For: ✓ Primary General O20 Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	9500.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not with, or at the request or suggestion of, any candidate or authorized committee or agent of e party committee) any political party committee or its agent.				
Edwards, Paula, , , [Electronically Filed] Date	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼			
American Liberty Fund		C C00623421			
Check if 24-hour report X 48-hour report X New repo	ort Amends report file	d on M M M / D D / Y Y Y Y Y			
Full Name of Payee Media Bridge LLC		Date of Public Distribution/Dissemination			
		09 / 29 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 200 Lake Front Drive, #200		Amount			
City State	Zip Code	7600.00			
Mineral VA	23117	Transaction ID : SE.5117 Date of Disbursement or Obligation			
Purpose of Expenditure Ad Brokerage	Category/ Type 004	10			
Name of Federal Candidate	Support Office	ce Sought: X House District: 21			
LOOMER, LAURA, , ,	Oppose	President Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought	36473.00 Disb 2020	oursement For: Primary General Other (specify) ▶			
Full Name of Payee		Date of Public Distribution/Dissemination			
Media Bridge LLC		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 200 Lake Front Drive, #200		Amount			
City State	Zip Code	3000.00			
Mineral VA	23117	Transaction ID : SE.5122 Date of Disbursement or Obligation			
Purpose of Expenditure Ad Production	Category/ Type 004	10 01 2020			
Name of Federal Candidate	✗ Support Office	ce Sought: X House District: 02			
BOEBERT, LAUREN, , ,	Oppose	President Senate State: CO			
Calendar Year-To-Date Per Election for Office Sought	8000.00 Disk 202	oursement For: Primary X General Other (specify) ▶			
	<u> </u>				
(a) SUBTOTAL of Itemized Independent Expenditures	·····	10600.00			
(b) SUBTOTAL of Unitemized Independent Expenditures	·····				
(c) TOTAL Independent Expenditures	•				
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	•			
	cally Filed] Date	09 30 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature					

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXTEND	TIONES		PAGE 5 OF 7 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	EC IDENTIFICATION NUMBER ▼
American Liberty Fund				C00623421
Check if 24-hour report 48-hour report	X New rep	port Amends repo	ort filed on	M / D = D / Y = Y = Y
Full Name of Payee Media Bridge LLC			Date of I	Public Distribution/Dissemination
Mailing Address 200 Lake Front Drive, #200			09	
			Amount	
City	City State Zip Code			1000.00
Mineral	VA	23117		tion ID: SE.5123 Disbursement or Obligation
Purpose of Expenditure Ad Brokerage		Category/ Type 004	M 10	
Name of Federal Candidate		x Support	Office Sought:	■ House District: 02
BOEBERT, LAUREN, , ,		Oppose	President	Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7	9000.00	Disbursement F 2020 Othe	for: Primary X General er (specify) ▶
Full Name of Payee			Date of	Public Distribution/Dissemination
Media Bridge LLC			M 09	
Mailing Address 200 Lake Front Drive, #200			Amount	
City	State	Zip Code	-	5500.00
Mineral	VA	23117		on ID : SE.5124 Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004	M 10	
Name of Federal Candidate		x Support	Office Sought:	₩ House District: 01
SHEDD, TIFFANY, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		13500.00	Disbursement F 2020 Othe	For: Primary ★ General er (specify) ►
(a) SUBTOTAL of Itemized Independent Exper	nditures			6500.00
(,				
(b) SUBTOTAL of Unitemized Independent Exp	penditures		· •	7 7 7
(c) TOTAL Independent Expenditures			•	7 1 7 1 1 7 1
Under penalty of perjury I certify that the inder with, or at the request or suggestion of, any caparty committee) any political party committee of	ndidate or authorize			
Edwards, Paula, , ,	[Electron	nically Filed] Date		30 / 2020
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24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
American Liberty Fund	
	C C00623421
Check if 24-hour report 48-hour report New report Amends report file	d on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Media Bridge LLC	M M / D D / Y Y Y Y
Mailing Address 200 Lake Front Drive, #200	09
City State Zip Code	1600.00
Mineral VA 23117	Transaction ID : SE.5125 Date of Disbursement or Obligation
Purpose of Expenditure Ad Brokerage Category/ Type 004	10 01 / 2020
Name of Federal Candidate Support Office	ce Sought:
SHEDD, TIFFANY, , ,	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought Disk 2020	oursement For: Primary General Other (specify) Other (specify) Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Media Bridge LLC	M = M / D = D / Y = Y = Y = Y
Mailing Address 200 Lake Front Drive, #200	09 28 2020
200 Lake 118/11 2/110, 7/200	Amount
City State Zip Code	5500.00
Mineral VA 23117	Transaction ID : SE.5126
Purpose of Expenditure Category/	Date of Disbursement or Obligation
Ad Production Type 004	10 01 2020
Name of Federal Candidate Support Office	ce Sought:
RODIMER, DAN, , ,	President Senate State: NV
Calendar Year-To-Date Dist	bursement For: Primary X General
Per Election for Office Sought 13500.00 202	
(a) SUBTOTAL of Itemized Independent Expenditures	7100.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7
(c) TOTAL Independent Expenditures	
(b) 161A2 independent Experience	1 4 1 4 1 4
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Edwards, Paula, , ,	M
[Electronically Filed] Date	09 30 2020
Signature	

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Sch	hedule E)	10.120				PAGE 7 FOR SE OF		7 48
	ME OF COMMITTEE (In Full)				FEC ID	DENTIFICATION		
	merican Liberty Fund					C00623421	N NO	
Che	ck if 24-hour report X 48-hour report X New report	ort Ame	ends repo	ort filed on	M = M /		Y Y Y	Y
	Full Name of Payee Media Bridge LLC			Date	of Public	c Distribution/[Disseminati	
	Mailing Address 200 Lake Front Drive, #200			l	09	28	2020	
Walling Address 200 Lake Front Drive, #200					unt			
Ī	City State	Zip Code					1600.00)
		23117			Transaction ID : SE.5127 Date of Disbursement or Obligation			
	Purpose of Expenditure Ad Brokerage	Category/ Type	004	$\Box \mid [$	10	01	2020	Y
Ì	Name of Federal Candidate	x s	Support	Office Soug	ıht:	X House [District:	03
	RODIMER, DAN, , ,		Oppose	Presid	_	Senate		1/
	Calendar Year-To-Date Per Election for Office Sought	15100.00		Disburseme	ent For: Other (sp	Primary Decify) ▶	X Ger	neral
t	Full Name of Payee					ic Distribution/l	Disseminati	ion
					M = M	/ D D /	YYYY	Y
	Mailing Address			Amo	ount			
Ì	City State	Zip Code			,	,		الت
-	Purpose of Expenditure	T		Date	of Disbu	ursement or O		
	Purpose of Experionale	Category/ Type			М и М	/ D D /	YYYY	Y
	Name of Federal Candidate	s	Support	Office Soug	ght:	House I	District:	
		C	Oppose	Presi	dent	Senate	State:	
Ì	Calendar Year-To-Date Per Election for Office Sought			Disburseme		Primary	Ger	neral
			<u> </u>		Other (sp	pecify) 🟲		
(8	a) SUBTOTAL of Itemized Independent Expenditures			· -	7	7	1600.00	
(k	b) SUBTOTAL of Unitemized Independent Expenditures			· • [
(0	c) TOTAL Independent Expenditures			· -	-	7	74800.00	
W	Inder penalty of perjury I certify that the independent expenditures vith, or at the request or suggestion of, any candidate or authorized arty committee) any political party committee or its agent.							
		ically Filed]	Date	9 09	30	2020		
	Signature							