## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
American Liberty Fund	C C00623421
Check if X 24-hour report 48-hour report New report Amends report filed	d on M = M / D = D / Y = Y = Y
Full Name of Payee Facebook	Date of Public Distribution/Dissemination
	07 31 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	1800.00
Menlo Park CA 94025	Transaction ID : SE.4996 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising  Category/ Type  004	07 31 / 2020
Name of Federal Candidate Support Office	ee Sought:
DONALDS, BYRON, , ,	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought  Disb 2020	oursement For:   ✓ Primary General  Other (specify)   ✓
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
State ZIP Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Galorida Todi To Balo	oursement For: Primary General
Per Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	1800.00
(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.	
	08 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	