

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
American Liberty Fund

ADDRESS (number and street) 8111 S. US Highway 75  
Suite 200  
Sherman TX 75091  
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00623421 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on 08 / 23 / 2022 in the State of FL  
(d) 30-Day POST-Election Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on / / in the State of

5. Covering Period 07 / 01 / 2022 through 08 / 03 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Edwards, Paula, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Edwards, Paula, , , [Electronically Filed] Date 10 / 11 / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**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="2022"/>	<input type="text" value="35619.50"/>	<input type="text" value="35619.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="126176.42"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="160200.00"/>	<input type="text" value="641510.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="286376.42"/>	<input type="text" value="677129.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="144778.12"/>	<input type="text" value="535531.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="141598.30"/>	<input type="text" value="141598.30"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="1800.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.12"/>	

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: MM / DD / YYYY 07 / 01 / 2022 To: MM / DD / YYYY 08 / 03 / 2022

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).....	160150.00	640550.00
(ii) Unitemized .....	50.00	960.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	160200.00	641510.00
(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) .....	160200.00	641510.00
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)).....▶	160200.00	641510.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	160200.00	641510.00

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	39778.12	187422.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	39778.12	187422.28
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) .....	105000.00	348108.92
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 .....	0.00	0.00
(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)).....	0.00	0.00
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)) ..	144778.12	535531.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	144778.12	535531.20

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	160200.00	641510.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	160200.00	641510.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	39778.12	187422.28
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	39778.12	187422.28

**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 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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. Casserly, Bruce, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1751 Dewayne Avenue  
 City Camarillo State CA Zip Code 93010  
 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 ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 21 / 2022  
**Transaction ID : A-28426**  
 Amount of Each Receipt this Period 50.00  
 Memo Item Contribution

**B. Robinson, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 653 Rebecca Drive  
 City Boulder Creek State CA Zip Code 95086  
 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 ▼ 700.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 15 / 2022  
**Transaction ID : A-28425**  
 Amount of Each Receipt this Period 100.00  
 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 ▼ 560000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 13 / 2022  
**Transaction ID : A-28434**  
 Amount of Each Receipt this Period 80000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80150.00
<b>TOTAL</b> 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 7 OF 17
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Topper, Lewis, , ,

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 ▼  
640000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	25	/	2022

**Transaction ID : A-28440**

Amount of Each Receipt this Period  
80000.00

Memo Item Contribution

**B.** 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

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80000.00
<b>TOTAL</b> This Period (last page this line number only).....	160150.00

**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)

<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. American Airlines**

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C [ ]

**Transaction ID : B-33507**

Amount of Each Disbursement this Period

[ ] 1213.59 [ ]

MEMO: Subvendor of-Shane Cory

Memo Item

Full Name (Last, First, Middle Initial)

**B. American Airlines**

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	5		2	0	2	2

FEC Identification Number

C [ ]

**Transaction ID : B-33508**

Amount of Each Disbursement this Period

[ ] 688.30 [ ]

MEMO: Subvendor of-Shane Cory

Memo Item

Full Name (Last, First, Middle Initial)

**C. American Airlines**

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

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	4		2	0	2	2

FEC Identification Number

C [ ]

**Transaction ID : B-33509**

Amount of Each Disbursement this Period

[ ] 2144.85 [ ]

MEMO: Subvendor of-Shane Cory

Memo Item

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

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

[ ] 0.00 [ ]

[ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]



**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)

<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. AMEX Fine Hotels and Resorts**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 500 West Madison St  
Suite 1000

M M M	/	D D D	/	Y Y Y Y Y
04		11		2022

City Chicago State IL Zip Code 60061

FEC Identification Number

Purpose of Disbursement  
Travel-Hotel

C
---

Candidate Name

**Transaction ID : B-33504**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

2230.72
---------

MEMO: Subvendor of-Shane Cory

Memo Item

**B. Ascend LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3211 English Way

M M M	/	D D D	/	Y Y Y Y Y
07		12		2022

City Prospect State KY Zip Code 40059

FEC Identification Number

Purpose of Disbursement  
Polling

C
---

Candidate Name

**Transaction ID : B-28433**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

5500.00
---------

Memo Item

**C. Charles Townsend LLC**

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 811 West North Boulevard

M M M	/	D D D	/	Y Y Y Y Y
08		03		2022

City Leesburg State FL Zip Code 34748

FEC Identification Number

Purpose of Disbursement  
Yard Signs

C
---

Candidate Name

**Transaction ID : B-28428**

Amount of Each Disbursement this Period

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2022  Primary  General  Other (specify) ▼

5000.00
---------

Memo Item

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

10500.00
----------

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

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**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. Combined Applications Group**

Full Name (Last, First, Middle Initial)  
Mailing Address 388 E Main St

City Orange State VA Zip Code 22960

Purpose of Disbursement Management Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 01 / 2022

FEC Identification Number: C

Transaction ID : B-23398

Amount of Each Disbursement this Period: 5000.00

Memo Item

**B. Cory, Shane, , ,**

Full Name (Last, First, Middle Initial)  
Mailing Address 11300 Astarita ave

City Partlow State VA Zip Code 22534

Purpose of Disbursement Travel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 07 / 08 / 2022

FEC Identification Number: C

Transaction ID : B-28436

Amount of Each Disbursement this Period: 13982.13

Memo Item

**C. Delta Airlines**

Full Name (Last, First, Middle Initial)  
Mailing Address 1030 Delta Boulevard

City Atlanta State GA Zip Code 30354

Purpose of Disbursement Travel-Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 04 / 11 / 2022

FEC Identification Number: C

Transaction ID : B-33505

Amount of Each Disbursement this Period: 4295.32

MEMO: Subvendor of-Shane Cory

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 18982.13

**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. Hotel Zaza**

Mailing Address 2332 Leonard Street

City Dallas State TX Zip Code 75201

Purpose of Disbursement  
Travel-Hotel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 08 / 2022

FEC Identification Number

C

Transaction ID : B-33500

Amount of Each Disbursement this Period

616.17

MEMO: Subvendor of-Shane Cory

Memo Item

Full Name (Last, First, Middle Initial)

**B. JetBlue Airways**

Mailing Address Old mill Corporate Center  
6322 S. 3000 E

City Cottonwood Heights State UT Zip Code 84121

Purpose of Disbursement  
Travel - Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify)

Category/Type

Date of Disbursement

MM / DD / YYYY  
06 / 01 / 2022

FEC Identification Number

C

Transaction ID : B-33501

Amount of Each Disbursement this Period

619.92

MEMO: Subvendor of-Shane Cory

Memo Item

Full Name (Last, First, Middle Initial)

**C. National Car Rental**

Mailing Address 2424 East 38th Street

City Dallas State TX Zip Code 75261

Purpose of Disbursement  
Travel-Car Rental

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
07 / 05 / 2022

FEC Identification Number

C

Transaction ID : B-33499

Amount of Each Disbursement this Period

595.28

MEMO: Subvendor of-Shane Cory

Memo Item

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

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

0.00

**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)

<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. Paula Y. Edwards, CPA, MST, LLP**

Full Name (Last, First, Middle Initial)

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:

Date of Disbursement 07 / 29 / 2022

FEC Identification Number C

**Transaction ID : B-28442**

Amount of Each Disbursement this Period 8000.00

Memo Item

**B. Reservhotel**

Full Name (Last, First, Middle Initial)

Mailing Address 3363 North East 163rd St  
Ste 704

City North Miami Beach State FL Zip Code 33160

Purpose of Disbursement Travel-Hotel

Candidate Name

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

State: District:

Date of Disbursement 06 / 01 / 2022

FEC Identification Number C

**Transaction ID : B-33502**

Amount of Each Disbursement this Period 619.92

MEMO: Subvendor of-Shane Cory

Memo Item

**C. SimpleTexting**

Full Name (Last, First, Middle Initial)

Mailing Address 1815 Purdy Avenue

City Miami State FL Zip Code 33139

Purpose of Disbursement SMS Messanging

Candidate Name

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

State: District:

Date of Disbursement 07 / 14 / 2022

FEC Identification Number C

**Transaction ID : B-28435**

Amount of Each Disbursement this Period 429.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8429.00

**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

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**

Full Name (Last, First, Middle Initial)

**A. SimpleTexting**

Mailing Address 1815 Purdy Avenue

City Miami State FL Zip Code 33139

Purpose of Disbursement SMS Messaging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
07 / 14 / 2022

FEC Identification Number

C  
**Transaction ID : B-28437**  
Amount of Each Disbursement this Period  
429.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SimpleTexting**

Mailing Address 1815 Purdy Avenue

City Miami State FL Zip Code 33139

Purpose of Disbursement SMS Messaging

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
07 / 14 / 2022

FEC Identification Number

C  
**Transaction ID : B-28438**  
Amount of Each Disbursement this Period  
1316.37

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Jefferson Hotel**

Mailing Address 101 West Franklin Street

City Richmond State VA Zip Code 23220

Purpose of Disbursement Travel-Hotel

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
03 / 21 / 2022

FEC Identification Number

C  
**Transaction ID : B-33506**  
Amount of Each Disbursement this Period  
903.14

MEMO: Subvendor of-Shane Cory

Memo Item

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

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

1745.37

**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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	7		2	1		2	0	2	2		

FEC Identification Number

C

**Transaction ID : B-28439**

Amount of Each Disbursement this Period

111.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

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  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

111.00

39767.50

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 17
	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 <b>Federal Election Commission</b>			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		<b>Transaction ID : D-23358</b>	
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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1800.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1800.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> 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 16 OF 17
	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 <b>Carone, Rafaello, , Mr.,</b>			Nature of Debt (Purpose): Political Consulting Fees
Mailing Address 89 Tayriver			
City Rocky Mount	State NC	Zip Code 27804	

Outstanding Balance Beginning This Period		Transaction ID : D-23357	
0.12			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	0.12	

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) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	0.12
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	0.12
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	0.12



SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) American Liberty Fund
FEC IDENTIFICATION NUMBER C C00623421

Check if 24-hour report 48-hour report New report Amends report filed on

Full Name of Payee Media Bridge LLC
Mailing Address 8111 South US Highway 75 Sherman
City McKinney State TX Zip Code 75091
Purpose of Expenditure Digital Media Ad Buy(7/23/22-8/23/22)
Date of Public Distribution/Dissemination 07/23/2022
Amount 40000.00
Transaction ID : E-28421
Date of Disbursement or Obligation 07/22/2022

Name of Federal Candidate: White, Royce Alexander, ,
Support Oppose
Office Sought: House Senate State: MN
District: 05
Calendar Year-To-Date Per Election for Office Sought 80000.00
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 8111 South US Highway 75 Sherman
City McKinney State TX Zip Code 75091
Purpose of Expenditure Digital Media Production/Ad Buy(7/23/22-8/23/22)
Date of Public Distribution/Dissemination 07/23/2022
Amount 65000.00
Transaction ID : E-28423
Date of Disbursement or Obligation 07/22/2022

Name of Federal Candidate: Loomer, Laura, ,
Support Oppose
Office Sought: House Senate State: FL
District: 11
Calendar Year-To-Date Per Election for Office Sought 128108.92
Disbursement For: Primary General 2022 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 105000.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 105000.00

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, , [Electronically Filed] Date 10/11/2022
Signature