PAGE 1 / 64

Image# 202101289413608250

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For Other	Than An Auth	orized Commi	ttee	0	ffice Use Only
NAME OF COMMITTEE (in fu	TYPE OR F	PRINT ▼	Example: If ty over the lines		12FE4M5	
American Liberty	/ Fund					
ADDRESS (number and Check if different than previously reported. (ACC	Suite 200				TX	75091
2. FEC IDENTIFICA	TION NUMBER ▼	CITY	′ ▲		STATE A	ZIP CODE ▲
C C00623421		3. IS RE	THIS PORT	NEW (N) OR	x AMEN	IDED
July 15 Quarterly I October 15 Quarterly I January 3	Report (Q1) (c) Report (Q2) Report (Q3)	ort On: Mar 2	20 (M2)		Aug 20 Sep 20 Oct 20 General (120 Special (128	(M9) Dec 20 (M12) (Non-Election Year Only) (M9) Jan 31 (YE) G) Runoff (12R)
July 31 Mi Report (No Year Only) Terminatio (TER)	d-Year on-election (MY)	30-Day POST-Election Report for the:	General (3	90G)	Runoff (30R)	Special (30S) in the State of
5. Covering Period	10 01	2020	through	10 __	14	2020
I certify that I have exa Type or Print Name of	Edwards	nd to the best of r , Paula, , ,	my knowledge and	d belief it is tru	ue, correct and co	omplete.
Signature of Treasurer	Edwards, Paula, , ,		[Electronic	ally Filed]	Date 01	28 / 2021
NOTE: Submission of fal-	se, erroneous, or inco	omplete information	may subject the p	erson signing tl	his Report to the p	penalties of 52 U.S.C. § 30109
Office Use						FEC FORM 3X Rev. 05/2016

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name American Liberty Fund 10 01 2020 10 14 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand -33.09January 1, 2020 (b) Cash on Hand at 362470.72 Beginning of Reporting Period..... 449113.40 999193.34 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 999160.25 811584.12 6(a) and 6(c) for Column B)..... 661009.00 848585.13 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 150575.12 150575.12 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 5000.00 Schedule C and/or Schedule D) 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

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Receipts FEC Form 3X (Rev. 05/2016) Page 3 Write or Type Committee Name American Liberty Fund 01 10 2020 10 14 2020 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 447010.73 993760.73 (i) Itemized (use Schedule A)..... 2102.67 5399.52 (ii) Unitemized (iii) TOTAL (add 999160.25 449113.40 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 0.00 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 999160.25 449113.40 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 33.09 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (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))......▶ 999193.34 449113.40

449113.40

999193.34

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		
Operating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		Caronaa Tour to Date		
(i) Federal Share	0.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating	7 7 7			
Expenditures	48.00	36401.60		
(add 21(a)(i), (a)(ii), and (b))▶	48.00	36401.60		
Transfers to Affiliated/Other Party Committees	0.00	0.00		
Contributions to Federal Candidates/Committees	0.00	0.00		
and Other Political Committees Independent Expenditures	0.00	0.00		
(use Schedule E) Coordinated Party Expenditures	660961.00	812183.53		
(52 U.S.C. § 30116(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	4 4 4	0.00		
(b) Political Party Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))▶	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	0.00	0.00		
Federal Election Activity (52 U.S.C. § 301016 (a) Allocated Federal Election Activity (from Schedule H6)	(20))			
(i) Federal Share	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00		
Entirely With Federal Funds	0.00	0.00		
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	661009.00	848585.13		
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	661009.00	848585.13		

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

TEO FOITH 3X (Nev. 03/2010)	r age 3			
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)	449113.40	999160.25		
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	449113.40	999160.25		
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	48.00	36401.60		
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	33.09		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	48.00	36368.51		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: PAGE Use separate schedule(s) (check only one) **X** 11a 11b 11c

6 OF

for each category of the 12 Detailed Summary Page 13 14 15 16 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 of Individual (Last, First, Middle Initial) or Full Organization Name brennan, edward, , , Date of Receipt Mailing Address 19669 gleedsville rd 2020 City Zip Code State Transaction ID: SA11AI.5866 VA Leesburg 20175 Amount of Each Receipt this Period FEC ID number of contributing C 260.73 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) retired retired Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 260.73 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** gandhi, shantikumar, , , Date of Receipt Mailing Address 1842 Kyrle Ter 10 10 2020 City State Zip Code Transaction ID: SA11AI.5885 The Villages FL 32162 Amount of Each Receipt this Period FEC ID number of contributing 1000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) retired Contribution retired Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Lomangino, Anthony, , , Date of Receipt Mailing Address 1620 S. Ocean Blvd 10 06 2020 City State Zip Code Transaction ID: SA11AI.5985 FL Palm Beach 33480 Amount of Each Receipt this Period FEC ID number of contributing C 150000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 200000.00 Other (specify) 151260.73 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 7 Use separate schedule(s) (check only one) **X** 11a 11b 11c

OF

for each category of the 12 Detailed Summary Page 13 14 15 16 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 of Individual (Last, First, Middle Initial) or Full Organization Name Martin, Jim, , , Date of Receipt Mailing Address 1695 Meadow Beach Lane 2020 City Zip Code State Transaction ID: SA11AI.5984 NY Mattituck 11952 Amount of Each Receipt this Period FEC ID number of contributing C 100000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Retired Retired Contibution Receipt For: Aggregate Year-to-Date ▼ Primary General 200000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Moskowitz, Michael, , , Date of Receipt Mailing Address 310 Lexington Avenue PHB 10 2020 City State Zip Code Transaction ID: SA11AI.5987 NY New York 10016 Amount of Each Receipt this Period FEC ID number of contributing 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Contribution Finance Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 75000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Nisbet, Peter, , , Date of Receipt Mailing Address 10 80 2020 City Zip Code State Transaction ID: SA11AI.5988 NY Malta 12020 Amount of Each Receipt this Period FEC ID number of contributing C 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution Self Employed Slef Employed Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 155000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE (check only one) **X** 11a 11b 11c

8 OF Use separate schedule(s) for each category of the 12 Detailed Summary Page 13 14 15 16 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 of Individual (Last, First, Middle Initial) or Full Organization Name S, Gerald W, , , Date of Receipt Mailing Address 5813 Jeff Place 2020 City Zip Code State Transaction ID: SA11AI.5943 MN Edina 55436 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) ceo omnetics Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 500.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Topper, Lewis, , , Date of Receipt Mailing Address 212 Treasure Place 10 2020 City State Zip Code Transaction ID: SA11AI.5983 FL Jupiter 33469 Amount of Each Receipt this Period FEC ID number of contributing 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Contribution Executive Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 410000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Topper, Lewis, , , Date of Receipt Mailing Address 212 Treasure Place 13 2020 City State Zip Code Transaction ID: SA11AI.5986 FL Jupiter 33469 Amount of Each Receipt this Period FEC ID number of contributing C 90000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution Self Employed Executive Receipt For: Aggregate Year-to-Date ▼ Primary General 500000.00 Other (specify) 140500.00 SUBTOTAL of Receipts This Page (optional).....

SCHEDULE A (FEC Form 3X)

Use separate schedule(s)

FOR LINE NUMBER:			: PAGE	5 9 OF	64	
(check only one)						
>	1 1a	11b	11c	12		
	13	14	15	16	17	

ITEMIZED RECEIPTS for each category of the Detailed Summary Page 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 of Individual (Last, First, Middle Initial) or Full Organization Name witkin, jack, , , Date of Receipt Mailing Address 1535 High St 2020 City Zip Code State Transaction ID: SA11AI.5976 Boulder CO 80304 Amount of Each Receipt this Period FEC ID number of contributing C 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) retired retired Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify)

SUBTOTAL of Receipts This Page (optional).....

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	Use separate schedule(s)	FOR LINE NUMBER: PAGE 10 OF (check only one)				
	for each category of the Detailed Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b			
Any information copied from such Reports and Statem or for commercial purposes, other than using the nam-						
NAME OF COMMITTEE (In Full) American Liberty Fund						
Full Name (Last, First, Middle Initial) A. Branch Banking and Trust Compan	ny		Date of Disbursement			
Mailing Address 200 W 2nd St			10 01 2020			
Winston Salem	State Zip Code NC 27101		FEC Identification Number			
Purpose of Disbursement Bank Fees Candidate Name		001	Transaction ID : SB21B.5979 Amount of Each Disbursement this Period			
Office Sought: House Disbursem		Category/ Type	17.00			
	Primary General Other (specify) ▼		Memo Item			
Full Name (Last, First, Middle Initial) B. Branch Banking and Trust Compan Mailing Address 200 W 2nd St		Date of Disbursement M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
	State Zip Code		FEC Identification Number			
Purpose of Disbursement Bank Fees	NC 27101		C Transaction ID : SB21B.5980			
Candidate Name Office Sought: House Disbursem	agent For	Category/ Type	Amount of Each Disbursement this Period			
Senate	Primary General Other (specify)		Memo Item			
Full Name (Last, First, Middle Initial) 5. Branch Banking and Trust Compan	ny		Date of Disbursement			
Mailing Address 200 W 2nd St			10 07 2020			
	State Zip Code NC 27101	001	FEC Identification Number			
Candidate Name	Category/ Type		Transaction ID: SB21B.5981 Amount of Each Disbursement this Period			
President	nent For: Primary General Other (specify)	,,	1.00 Memo Item			
	Other (specify) ▼		Memo Item			

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SCHEDULE B (FEC Form 3X)			Hee congrete schedule(s) FOR LINE NUMBER: PAGE				GE	11 0	F 64			
IT	EMIZED DISBURSEMENTS		rate schedule(s) category of the	(check only one)		, –	7.00	_	7 07			
			Summary Page	×	21b 28a	22 28b	23		26 29		27 30b	
Δn	y information copied from such Reports and Staten	nents may r	not he sold or use	ed by any						na co		ions
	for commercial purposes, other than using the name											
	NAME OF COMMITTEE (In Full)											
$ \rangle$	American Liberty Fund											
_	Full Name (Last, First, Middle Initial)											
A.	Branch Banking and Trust Compar	ny				Date of			ent		Y	V.
	Mailing Address 200 W 2nd St					10]	13			020	Y
	,	State	Zip Code			FEC Id	entifica	tion N	Numbei	r		
	Winston Salem Purpose of Disbursement	NC	27101				_	-	-	_		
	Bank Fees			001	\Box	C	mes: "	ar 15	. 000	4D 51	000	
	Candidate Name			Category	y/	Tra Amount	i nsacti of Ea		-	_		eriod
	Office Cought: House			Туре			_	-	_	_	15.00	1
	Office Sought: House Disburser Senate	nent For: Primary	General							-	15.00	,
	President	Other (spec				Ma	mo Ite	m				
	State: District:					LI IVIE	iio ite	"				
P	Full Name (Last, First, Middle Initial)					Dota st	Diake	roce	ont			
B.						Date of Disbursement						
	Mailing Address				\neg	IVI = IVI	֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓	, - D]	Y	- 1	
	City	State	Zip Code		_							-
	Say S	Jaco	Zip Oode			FEC Id	entifica	tion N	Numbei	r		
	Purpose of Disbursement				\neg	Amount of Each Disbursement this Period						
	Candidate Name				<u> </u>				and t			
				Category Type	y/	Amount	of Ea	ch Di	sburse	ment	t this P	eriod
	Office Sought: House Disbursen				\neg							
	Senate	Primary	General				,					
	State: President State:	Other (spec	ліу)			Me	mo Ite	m				
_	Full Name (Last, First, Middle Initial)											
C.						Date of	Disbu	rseme	ent			
	Mailing Address				\dashv	M = M	/ [) I D	/	Y	Υ	Υ
	City	State	Zip Code			FEC Ide	entifica	tion N	Numbei	r		
	Purpose of Disbursement					С						
	·			1			_	_		-	_	
Candidate Name Category/ Type					y/	Amount	of Ea	ch Di	sburse	ment	t this P	eriod
	Office Sought: House Disburser				\neg							
		Primary	General									
	State: President State:	Other (spec	сіту) ▼			Me	mo Ite	m				
Г								-		-	-	-
s	UBTOTAL of Disbursements This Page (optional)				•						15.0	0
					_				-		48.0	10
ΙT	OTAL This Period (last page this line number only)					1 .					70.0	~

SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

PAGE

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X	10

OF

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NAME OF COMMITTEE (In Full) American Liberty Fund A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Unbilled Media Advertising Video Services Media Bridge LLC (Estimate) Mailing Address 200 Lake Front Drive, #200 State Zip Code Mineral VA 23117 Transaction ID: SD10.5592 Outstanding Balance Beginning This Period 40000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 40000.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): **Unbilled Accountng Services (Estimate)** Paula Y. Edwarrds, CPA, MST, LLP Mailing Address 1629 K Street NW Suite 300 City State Zip Code Washington 20006 Outstanding Balance Beginning This Period Transaction ID: SD10.5593 5000.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 5000.00 0.00 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 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 5000.00 1) SUBTOTALS This Period This Page (optional)..... 5000.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 5000.00 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

TEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
				M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	W - W / D - D / T - T - T - T
Full Name of Payee Facebook		☐ Memo	Item Dat	e of Public Distribution/Dissemination
				10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Am	ount
City	State	Zip Code	— г	8000.00
Menlo Park	CA	94025		nsaction ID : SE.5138
Purpose of Expenditure		Category/	Dat	e of Disbursement or Obligation
Digital Adverising		Type 004		10 01 2020
Name of Federal Candidate:		X Support	Office Sou	ight: House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Pres	sident Senate State: FL
Calendar Year-To-Date		8000.00	Disbursem	nent For: Primary Seneral
Per Election for Office Sought	7-1-7-	000.00	2020	Other (specify)
Full Name of Payee Facebook		☐ Memo	Item Dat	e of Public Distribution/Dissemination
				10 D D D Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Am	ount
City	State	Zip Code	— г	3000.00
Menlo Park	CA	94025		ansaction ID : SE.5140
Purpose of Expenditure			Dat	e of Disbursement or Obligation
Digital Adverising		Category/ Type 004		10 01 2020
Name of Federal Candidate:		✗ Support	Office Sou	ight: X House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Pres	sident Senate State: FL
Calendar Year-To-Date		11000.00	Disbursem	nent For: Primary Seneral
Per Election for Office Sought	7 7		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	11000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
			· <u>-</u>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	ed1	M = M	/ D D / Y Y Y Y
Signature		Date	e 01	28 2021

ITEMIZED INDEPENDENT EXPENDITURES			PAGE 14 OF 64
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund			
			C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
Facebook			10 01 7 2020
Mailing Address 1 Hacker Way			Amount
City	State	Zip Code	3000.00
Menlo Park	CA	94025	Transaction ID : SE.5166
	- OA	0.1020	Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	10 01 / 2020
Name of Federal Candidate:		✗ Support	Office Sought: House District: 03
BOEBERT, LAUREN, , ,		Oppose	President Senate State: CO
Calendar Year-To-Date		13500.00	Disbursement For: Primary General
Per Election for Office Sought	7-1-1-7-	13300.00	2020
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
Facebook			10 01 Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			10 01 2020
Triadici Way			Amount
City	State	Zip Code	5000.00
Menlo Park	CA	94025	Transaction ID : SE.5168 Date of Disbursement or Obligation
Purpose of Expenditure		Category/	M M / D D / Y Y Y Y
Digital Advertising		Type 004	10 01 2020
Name of Federal Candidate:		🗶 Support	Office Sought: House District:01
SHEDD, TIFFANY, , ,		Oppose	President Senate State: AZ
Calendar Year-To-Date		20100.00	Disbursement For: Primary General
Per Election for Office Sought	7 7	20100.00	2020 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditu	res		·
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
Edwards, Paula, , ,	[Flootronicall. F2	adl	M = M / D = D / Y = Y = Y
Signature	[Electronically File	eaj Date	01 28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 15 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Objects if Code beauty and the Code beauty and the	Name			M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	
Full Name of Payee Facebook		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1 Hacker Way			Amo	10 02 2020 unt
City	State	Zip Code		3000.00
Menlo Park	CA	94025		saction ID : SE.5128
Purpose of Expenditure Digital Advertising		Category/ Type 004		of Disbursement or Obligation 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	Office Soug	ht: X House District: 21
LOOMER, LAURA, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	29100.00	Disburseme	ent For: Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Facebook				10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Ama	unt
			Amo	
City Menlo Park	State	Zip Code	Tran	5000.00 nsaction ID : SE2147483643
Purpose of Expenditure	CA	94025		of Disbursement or Obligation
Digital Advertising		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	Office Soug	ht: K House District: 01
SHEDD, TIFFANY, , ,		Oppose	Presid	dent Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7	27100.00	Disburseme	ent For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	; <u></u>		· •	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • [
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	edl -	M = M /	D D / Y Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 16 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M M / D D / Y Y Y Y
Full Name of Payee Facebook		☐ Memo	Item Date	of Public Distribution/Dissemination
			[10 03 7 2020
Mailing Address 1 Hacker Way			Amo	unt
City	State	Zip Code		3000.00
Menlo Park	CA	94025		saction ID : SE2147483628
Purpose of Expenditure		Category/	Date	of Disbursement or Obligation
Digital Advertising		Type 004		10 03 2020
Name of Federal Candidate:		✗ Support	Office Soug	ht: 🗶 House District:03
RODIMER, DAN, , ,		Oppose	Presi	dent Senate State: NV
Calendar Year-To-Date		18600.00	Disburseme	ent For: Primary General
Per Election for Office Sought	7 7	10000.00	2020	Other (specify) ▶
Full Name of Payee Facebook		☐ Memo	Item Date	of Public Distribution/Dissemination
				10 05 7 2020
Mailing Address 1 Hacker Way			Amo	unt
City	State	Zip Code	$ \Gamma$	10000.00
Menlo Park	CA	94025		nsaction ID : SE2147483637
Purpose of Expenditure			Date	of Disbursement or Obligation
Ditigal Advertising		Category/ Type 004		10 05 2020
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District: 13
HAGAN, CHRISTINA, , ,		Oppose	Presi	dent Senate State: OH
Calendar Year-To-Date		10000.00	Disburseme	ent For: Primary General
Per Election for Office Sought	7 7		2020	Other (specify) ▶
			_	
(a) SUBTOTAL of Itemized Independent Expenditures	i		· •	13000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
, ,				
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	ed1	M = M /	D D / Y Y Y Y Y
Signature		Date	9 01	28 2021

				FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
Timonoan Zibony Fana				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed	on M M / D D / Y M Y M Y M Y
Full Name of Payee Facebook		☐ Memo	Item	Date of Public Distribution/Dissemination
				10 05 2020
Mailing Address 1 Hacker Way				Amount
City	State	Zip Code		5000.00
Menlo Park	CA	94025		Transaction ID : SE2147483632 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020		Category/ Type 004	4	10 05 Y 2020
Name of Federal Candidate:		✗ Support	Office	e Sought: House District: 02
CRAFTS, DALE, , ,		Oppose		President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7	18000.00	Disbu 2020	orsement For:
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Facebook				10 05 / Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way				Amount
City	State	Zip Code		3000.00
Menlo Park	CA	94025		Transaction ID: SE2147483630 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	1	10 / D D / Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office	e Sought: X House District: 02
CRAFTS, DALE, , ,		Oppose		President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		22000.00	Disbu 2020	ursement For: Primary X General
Ter Election for Office Cought	7			Other (specify) ▶
(a) CURTOTAL of Bassisad Independent Funerality				0000.00
(a) SUBTOTAL of Itemized Independent Expenditures			▶	8000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		▶	
()				
(c) TOTAL Independent Expenditures			·· •	7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	led]	M	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	е 0	11 28 2021

TEMIZED INDEPENDENT EXPENDITURES			PAGE 18 OF 64
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund			
			C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
Facebook			10 05 2020
Mailing Address 1 Hacker Way			Amount
City	State	Zip Code	5000.00
Menlo Park	CA	94025	Transaction ID : SE2147483625 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought: House District: 03
RODIMER, DAN, , ,		Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	24200.00	Disbursement For: ☐ Primary 🗶 General 2020 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Facebook			10 05 / Y Y Y Y Y Y
Mailing Address 1 Hacker Way			
			Amount
City	State	Zip Code	10000.00
Menlo Park	CA	94025	Transaction ID : SE2147483623 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	10
Name of Federal Candidate:		✗ Support	Office Sought:
KING, ESTHER JOY, , ,		Oppose	President Senate State: IL
Calendar Year-To-Date		10000.00	Disbursement For: Primary General
Per Election for Office Sought	7 7	1000.00	2020
(a) SUBTOTAL of Itemized Independent Expenditures	·		15000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized		
Edwards, Paula, , ,	[Electronically Fil	ed1	M = M / D = D / Y = Y = Y
Signature	Гистопишиу F ll	Date	9 01 28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 19 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Facebook				10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Amo	unt
City	State	Zip Code	— F	5000.00
Menlo Park	CA	94025		nsaction ID : SE2147483618 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 / 05 / 2020
Name of Federal Candidate:		X Support	Office Sou	ght: X House District: 03
BOEBERT, LAUREN, , ,		Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	19100.00	Disburseme 2020	ent For: Primary X General Other (specify) ►
Full Name of Payee		Memo	Item Date	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				10 00 2020
Triabile Tray			Amo	unt
City	State	Zip Code		5000.00
Menlo Park	CA	94025		nsaction ID : SE2147483616 of Disbursement or Obligation
Purpose of Expenditure Digital Adverising		Category/ Type 004		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sou	ght: 🗶 House District:27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Presi	dent Senate State: FL
Calendar Year-To-Date		24200.00	Disburseme	ent For: Primary General
Per Election for Office Sought	7		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	;		· [10000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· [
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
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Signature	LECCHORICALLY I'll	Date	9 01	28 2021

American Liberty Fund FEC IDENTIFICATION NUMBER ▼ C C00623421	TEMIZED INDEPENDENT EXPENDITURES				PAGE 20 OF 64
American Liberty Fund C	NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
Theck if	,				
Full Name of Payee State Zip Code President Senate State Memo Item Date of Public Distribution/Dissemination					C C00623421
Mailing Address Hacker Way Amount	Check if 24-hour report 48-hour report	New repo	ort Amends repo		M M / D D / Y Y Y Y
Mailing Address 1 Hacker Way City State Purpose of Expenditure Digital Advertising (106/2020-11/3/2020) Name of Federal Candidate: Calegory/ Per Election for Office Sought Full Name of Payee FaceDook Mailing Address 1 Hacker Way Calegory/ President Senate State: ME Calegory/ President Senate State: ME Calegory/ President Senate State: ME Disbursement For: Primary General 2020 Other (specity) Amount City Manual Advertising City Manual Advertising City Manual Advertising City Manual Advertising City State City State City State City State City State City State City Manual Advertising Category/ Type Od4 Transaction ID: SE-2147483609 Disbursement For: Primary General 2020 Other (specity) Amount Transaction ID: SE-21474833099 Date of Public Distribution/Dissemination Transaction ID: SE-21474833099 Date of Disbursement For: Primary Amount Transaction ID: SE-21474833099 Date of Disbursement For: Primary Amount Transaction ID: SE-21474833099 Date of Disbursement For: One Transaction ID: SE-21474833099 Date of Disbursement For: Primary Ades One Transaction ID: SE-21474833099 Date of Disbursement For: Primary Ades One Transaction ID: SE-21474833099 Date of Disbursement For: Primary Amount Transaction ID: SE-21474833099 Date of Disbursement For: Primary Ades One Transaction ID: SE-21474833099 Date of Disbursement For: Primary Ades One Transaction ID: SE-21474834099 Date of Disbursement For: Primary Ades One Transaction ID: SE-2147483409 Date of Disbursement For: Primary Ades One Transaction ID: SE-2147483409 Date of Disbursement For: Primary Ades One Transaction ID: SE-2147483409 Date of Disbursement F			Memo	Item Date	e of Public Distribution/Dissemination
City State					
Menio Park Display Display Dispenditure Display Displa	Mailing Address 1 Hacker Way			Amo	ount
Purpose of Expenditure Digital Advertising (10/6/2020-11/3/2020) Name of Federal Candidate: X Support	City	State	Zip Code	-	3468.00
Purpose of Expenditure Digital Advertising (10/6/2020-11/3/2020) Name of Federal Candidate: CRAFTS, DALE Calendar Year-To-Date Per Election for Office Sought CIty Menio Park Category/ Type Disbursement For: Disbursemen	Menlo Park	CA	94025		
CRAFTS, DALE, Oppose President Senate State: ME Calendar Year-To-Date Per Election for Office Sought 2608.00 Disbursement For: Primary ▼ General 2020 Other (specify) ▶ Full Name of Payee Facebook Mailing Address 1 Hacker Way City State Zip Code 94025 Purpose of Expenditure Digital Advertising Category/ Type 004 Name of Federal Candidate: Specific Spe					M M / D D / Y Y Y Y
CRAFTS, DALE, Oppose President Senate State: ME Calendar Year-To-Date Per Election for Office Sought 26968.00 Disbursement For: Primary	Name of Federal Candidate:		X Support	Office Sou	ght: X House District:02
Per Election for Office Sought Full Name of Payee Facebook Mailing Address 1 Hacker Way City Menlo Park CA 94025 Purpose of Expenditure Digital Advertising Name of Federal Candidate: BOEBERT, LAUREN Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Ele	CRAFTS, DALE, , ,		_	Presi	ident Senate State: ME
Facebook Mailing Address 1 Hacker Way City Menio Park Purpose of Expenditure Digital Advertising Name of Federal Candidate: BOEBERT, LAUREN, , Oppose Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought Amount Transaction ID: SE-2147483609 Date of Disbursement or Obligation Transaction ID: SE-2147483609 Date of Disbursement For: Qate Date of Disbursement For: Qate Date of Disbursement or Obligation Transaction ID: SE-2147483609 Date of Disbursement For: Qate Date of Disbursement or Obligation Transaction ID: SE-2147483609 Date of Disbursement For: Qate Date of Disbursement or Obligation Transaction ID: SE-2147483609 Date of Disbursement or Obligation Transaction ID: SE-2147483609 Date of Disbursement or Obligation Transaction ID: SE-2147483609 Date of Disbursement For: Qate Dat		7 1 1 7	26068.00	2020	
Mailing Address 1 Hacker Way Mailing Address 1 Hacker Way			☐ Memo	Item Date	e of Public Distribution/Dissemination
Amount City Menlo Park Purpose of Expenditure Digital Advertising Name of Federal Candidate: BOEBERT, LAUREN,	Facebook				10 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Menlo Park CA 94025 Transaction ID: SE2147483609 Date of Disbursement or Obligation Purpose of Expenditure Digital Advertising Category/ Type 004 Name of Federal Candidate: BOEBERT, LAUREN, Calendar Year-To-Date Per Election for Office Sought 23568.00 Disbursement For: Primary ▼ General 2020 Other (specify) ▶ Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures Index 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 O1 28 2021	Mailing Address 1 Hacker Way			Amo	punt
Menlo Park CA 94025 Transaction ID: SE2147483609 Date of Disbursement or Obligation Purpose of Expenditure Digital Advertising Category/ Type 004 Name of Federal Candidate: BOEBERT, LAUREN, Calendar Year-To-Date Per Election for Office Sought 23568.00 Disbursement For: Primary ▼ General 2020 Other (specify) ▶ Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Itemized Independent Expenditures Index 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 O1 28 2021	City	Ctoto	Zin Codo		3468.00
Purpose of Expenditure Digital Advertising Category/ Type Name of Federal Candidate: BOEBERT, LAUREN, , Calendar Year-To-Date Per Election for Office Sought A Support Calendar Year-To-Date Per Election for Office Sought Category/ Type Oppose President Senate State: CO Disbursement For: Primary General Compose Other (specify) (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures 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. [Electronically Filed] Date O1 28 2020 O20 O20 Other (specify) Compose Other (specify) Compose Other (specify)					nsaction ID : SE2147483609
Digital Advertising Name of Federal Candidate: X Support Support Senate State: CO			Category/	Date	
BOEBERT, LAUREN, , ,	Digital Advertising				
Calendar Year-To-Date Per Election for Office Sought 23568.00 Disbursement For: Primary X General 2020 Other (specify) > (a) SUBTOTAL of Itemized Independent Expenditures	Name of Federal Candidate:		🗶 Support	Office Sou	ght: K House District: 03
Per Election for Office Sought 23568.00 2020 Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures 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.	BOEBERT, LAUREN, , ,		Oppose	Presi	ident Senate State: CO
(a) SUBTOTAL of Itemized Independent Expenditures			23568.00		ent For: Primary General
(c) TOTAL Independent Expenditures	Per Election for Office Sought	7-1-1-5-		2020	Other (specify) ▶
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 **Date** Date** Da	(a) SUBTOTAL of Itemized Independent Expenditures	3			6936.00
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, , ,	(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • [
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, , ,	(c) TOTAL Independent Expenditures			•	
[Electronically Filed] Date 01 28 2021	with, or at the request or suggestion of, any candida	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
Date 01 28 2021	Edwards, Paula, , ,	[Electronicall. E2	adl	M = M	
		рыестопісану Ен	Date	9 01	28 2021

			FOR LINE 24 (OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION	
American Liberty Fund				NOMBER V
·			C C00623421	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	t filed on M M / D D / Y	YYY
Full Name of Payee		☐ Memo	tem Date of Public Distribution/Dis	semination
Facebook			10 / D D / Y	2020
Mailing Address 1 Hacker Way			10 00	2020
,			Amount	
City	State	Zip Code		3468.00
Menlo Park	CA	94025	Transaction ID : SE2147483 Date of Disbursement or Obli	
Purpose of Expenditure Digital Advertising		Category/ Type 004		2020
Name of Federal Candidate:		X Support	Office Sought: X House Dis	trict:02
BOEBERT, LAUREN, , ,		Oppose		tate: ME
Calendar Year-To-Date		29536.00	Disbursement For: Primary	X General
Per Election for Office Sought	7 7	23000.00	2020 Other (specify) ▶	
Full Name of Payee		☐ Memo	tem Date of Public Distribution/Dis	semination
Facebook			M M / D D / Y	2020
Mailing Address 1 Hacker Way			Amount	
			Amount	
City	State	Zip Code		3468.00
Menlo Park	CA	94025	Transaction ID : SE214748 Date of Disbursement or Obli	
Purpose of Expenditure Digital Advertising		Category/ 004	10 06 / Y	2020
Digital Advortioning		Type 004	10 00	2020
Name of Federal Candidate:		x Support	Office Sought: House Dis	strict: 01
SHEDD, TIFFANY, , ,		Oppose	President Senate S	tate: AZ
Calendar Year-To-Date		30568.00	Disbursement For: Primary	X General
Per Election for Office Sought	7-1-1-7	30300.00	2020 Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	1			6936.00
(a, 002 10 11 a 11 a 11 a 11 a 11 a 11 a 11				000000
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
			7	
(c) TOTAL Independent Expenditures			>	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidar party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	led1 -	M M / D D / Y Y Y Y	Y
Signature	T	Date	01 28 2021	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 22 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	on M = M / D = D / Y = Y = Y
Full Name of Payee Facebook		☐ Memo	Item	Date of Public Distribution/Dissemination
1 doobook				10 07 Y Y Y Y Y Y
Mailing Address 1 Hacker Way				Amount
City	State	Zip Code		10000.00
Menlo Park	CA	94025		Transaction ID : SE.5214 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	4	10 07 / 2020
Name of Federal Candidate:		Support	Office	Sought: House District: 21
LOOMER, LAURA, , ,		Oppose	l	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		105558.00	Disbui 2020	rsement For: Primary
,	, , , , , , , , , , , , , , , , , , , ,		. 1	Other (specify)
Full Name of Payee Facebook		∐ Memo	Item	Date of Public Distribution/Dissemination
Mailing Address				10 07 2020
1 Hacker Way				Amount
City	State	Zip Code		8000.00
Menlo Park	CA	94025		Transaction ID : SE.5222 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office	Sought: K House District: 13
HAGAN, CHRISTINA, , ,		Oppose		President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	1	20000.00	Disbui 2020	sement For: Primary
				United (Specify)
(a) SUBTOTAL of Itemized Independent Expenditures				18000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		. •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ite or authorized			
Edwards, Paula, , ,	Electronically Fil	ed1 -		M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 23 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Facebook			[10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Amou	unt
City	State	Zip Code	$ \Gamma$	5000.00
Menlo Park	CA	94025		saction ID : SE.5224 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 07 / 2020
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District:02
CRAFTS, DALE, , ,		Oppose	Presid	ME
Calendar Year-To-Date Per Election for Office Sought	7	34536.00	Disburseme	nt For:
Full Name of Payee		☐ Memo	Item Date	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				10 07 2020
			Amoi	unt
City	State	Zip Code		5000.00
Menlo Park	CA	94025		nsaction ID : SE.5231 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 001		10 07 7 2020
Name of Federal Candidate:		x Support	Office Soug	ht: K House District: 03
RODIMER, DAN, , ,		Oppose	Presid	dent Senate State: FM
Calendar Year-To-Date		5000.00	Disburseme	nt For: Primary Seneral
Per Election for Office Sought	7 7		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	s		· [10000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· -	
(c) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
Edwards, Paula, , ,	[Electronically Fil	odl	M _ M _ /	DID / YIYIYIY
Signature	писионивну Г н	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 24 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	M M / D D / Y Y Y Y
Full Name of Payee Facebook		☐ Memo	Item C	Date of Public Distribution/Dissemination
				10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Δ	mount
City	State	Zip Code		8000.00
Menlo Park	CA	94025		ransaction ID : SE.5236 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 07 Congaton
Name of Federal Candidate:		✗ Support	Office S	Sought: X House District:17
KING, ESTHER JOY, , ,		Oppose	l	resident Senate State: IL
Calendar Year-To-Date		20000.00		ement For: Primary X General
Per Election for Office Sought	7 7	20000.00	2020	Other (specify) ▶
Full Name of Payee Facebook		☐ Memo	Item C	Date of Public Distribution/Dissemination
				10 07 Y Y Y Y Y
Mailing Address 1 Hacker Way			Δ	mount
City	State	Zip Code		5000.00
Menlo Park	CA	94025	I .	Transaction ID : SE.5245 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 07 7 2020
Name of Federal Candidate:		✗ Support	Office S	Sought: House District:03
BOEBERT, LAUREN, , ,		Oppose	P	resident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	T	28568.00	Disburse 2020	ement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				13000.00
			- 7	
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	Electronically Fil	ed1 -	M = M	/ DDD / YTYTY
Signature	Lacironnumy I'm	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 25 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M M
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Facebook				10 07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Amo	punt
City	State	Zip Code	-	5000.00
Menlo Park	CA	94025		nsaction ID : SE.5251 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		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	Office Sou	ght: 🗶 House District:01
SHEDD, TIFFANY, , ,		Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	35568.00	Disburseme 2020	ent For:
Full Name of Payee		☐ Memo	Item Date	e 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			A	
			Amo	ount
City	State	Zip Code		10000.00
Menlo Park	CA	94025		nsaction ID : SE.5229 e of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 08 7 2020
Name of Federal Candidate:		✗ Support	Office Sou	ght: X House District: 13
HAGAN, CHRISTINA, , ,		Oppose	Presi	
Calendar Year-To-Date		31957.00	Disburseme	ent For: Primary X General
Per Election for Office Sought	7 7	01007.00	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;		· [15000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· -	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
Edwards, Paula, , ,	[Electronically Fil	odl	M = M	/ D D / Y Y Y Y Y
Signature	писионивну Г н	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 26 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
				/ M / D D / Y Y Y Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	
Full Name of Payee Facebook		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address			L	10 08 2020
1 Hacker Way			Amou	unt
City	State	Zip Code	TI:	8000.00
Menlo Park	CA	94025		saction ID : SE.5232 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 001		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Soug	ht: House District: 03
RODIMER, DAN, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	13000.00	Disburseme	nt For: Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Facebook			- 1	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				10 00 2020
			Amoi	unt
City	State	Zip Code		10000.00
Menlo Park	CA	94025	I	nsaction ID : SE.5238 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 08 7 2020
Name of Federal Candidate:		✗ Support	Office Soug	ht: K House District: 17
KING, ESTHER JOY, , ,		Oppose	Presid	dent Senate State: IL
Calendar Year-To-Date Per Election for Office Sought		33957.00	Disburseme	
	1 1			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	;		· [18000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	ed1 -	M M /	D D / Y Y Y Y Y
Signature	Laconomouny I'll	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 27 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
,				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	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			Amo	unt
City	State	Zip Code	-	10000.00
Menlo Park	CA	94025		saction ID : SE.5246 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		M 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	Office Soug	ght: X House District: 03
BOEBERT, LAUREN, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	39925.00	Disburseme	ent For: Primary
Full Name of Payee		☐ Memo	Item Date	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			A-ma	
			Amo	unt
City	State	Zip Code		10000.00
Menlo Park	CA	94025		of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		M 10 / 08 / Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Soug	ght: K House District: 02
CRAFTS, DALE, , ,		Oppose	Presid	dent Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		47893.00	Disburseme	ent For: Primary General
Per Liection for Office Sought	7 7		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	\$			20000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· [
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Edwards, Paula, , ,	[Electronically Fil	ed1	M = M /	D D / Y Y Y Y Y
Signature	при применя при применения примен	Date	9 01	28 2021

TEMIZED INDEFENDENT EXPENDITORES			PAGE 28 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
American Liberty Fund			C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on
Full Name of Payee Facebook		☐ Memo	
Mailing Address 1 Hacker Way			10 09 7 2020
i nackei way			Amount
City	State	Zip Code	680.00
Menlo Park	CA	94025	Transaction ID : SE.5227 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	10 09 7 2020
Name of Federal Candidate:		✗ Support	Office Sought: X House District: 02
CRAFTS, DALE, , ,		Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7 1 7	48573.00	Disbursement For: ☐ Primary X General 2020 ☐ Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Facebook			10 09 2020
Mailing Address 1 Hacker Way			Amount
City	State	Zip Code	3400.00
Menlo Park	CA	94025	Transaction ID : SE.5228
Purpose of Expenditure Digital Advertising		Category/ Type 004	Date of Disbursement or Obligation 10 09 2020
Name of Federal Candidate:		✗ Support	Office Sought: House District: 02
CRAFTS, DALE, , ,		Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7 7	51973.00	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditures	S		4080.00
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		•
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized	•	• • • •
Edwards, Paula, , ,	[Electronically File	ed] Date	9 01 28 2021
Signature			

ITEMIZED INDEPENDENT EXPENDITURES			PAGE 29 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
American Liberty Fund			C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
Facebook		_	10 09 / 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	6000.00
Menlo Park	CA	94025	Transaction ID : SE.5240 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought: House District: 17
KING, ESTHER JOY, , ,		Oppose	President Senate State: IL
Calendar Year-To-Date		20057.00	Disbursement For: Primary X General
Per Election for Office Sought	7 7	39957.00	Other (specify) >
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Facebook			10 09 / Y Y Y Y Y
Mailing Address 1 Hacker Way			Amount
City	State	Zip Code	20000.00
Menlo Park	CA	94025	Transaction ID : SE.5243
Purpose of Expenditure		Category/	Date of Disbursement or Obligation
Digital Advertising		Type 004	10 09 2020
Name of Federal Candidate:		🗶 Support	Office Sought: House District: 21
LOOMER, LAURA, , ,		Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	, , ,	127558.00	Disbursement For: ☐ Primary
			Cirici (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	;		26000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		·
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized		
Edwards, Paula, , ,	[Electronically Fil	ed] Date	e 01 28 2021
Signature	<u> </u>	_ Date	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 30 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
				M M / D D / Y Y Y Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	
Full Name of Payee Facebook		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Mailing Address				10 09 7 2020
1 Hacker Way			Ar	nount
City	State	Zip Code		6340.00
Menlo Park	CA	94025		ransaction ID : SE.5247 ate of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 09 / Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sc	ought: X House District: 03
BOEBERT, LAUREN, , ,		Oppose	Pre	esident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7	48265.00	Disburse 2020	ment For: Primary
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
Facebook		Memo	item Be	10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way				
			Ai	nount
City Menlo Park	State	Zip Code 94025		9000.00 ransaction ID : SE.5252
Purpose of Expenditure		Cotogony	Da	ate of Disbursement or Obligation
Digital Advertising		Category/ Type 004		10 09 2020
Name of Federal Candidate:		✗ Support	Office Sc	ought: House District: 01
SHEDD, TIFFANY, , ,		Oppose	Pre	esident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		46925.00	Disburse 2020	ment For: Primary X General
	7			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. г	15340.00
(a) SUBTUTAL OF Itemized independent Expenditures			• •	15340.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	Electronically File	ed]	e 01	28 2021
Signature	<u> </u>	Date	5 01	2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 31 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed o	m M = M / D = D / Y = Y = Y
Full Name of Payee Facebook		☐ Memo	Item	Date of Public Distribution/Dissemination
				10 09 2020
Mailing Address 1 Hacker Way				Amount
City	State	Zip Code		10000.00
Menlo Park	CA	94025		Transaction ID : SE.5256 Date of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004		10 09 / Y Y Y Y Y
Name of Federal Candidate:		Support	Office	Sought: Mouse District: 21
FRANKEL, LOIS J., , ,		X Oppose	l	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 7	137559.00	Disburs 2020	sement For: Primary General Other (specify) ▶
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination
Facebook				10 09 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		21833.00
Menio Park	CA	94025		Transaction ID : SE.5315 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 09 2020
Name of Federal Candidate:		✗ Support	Office	Sought: Mouse District: 13
HAGAN, CHRISTINA, , ,		Oppose	F	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	* · · · ·	55790.00	Disburs 2020	sement For: Primary General General Other (specify) ►
•				
(a) SUBTOTAL of Itemized Independent Expenditures			. •	31833.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		1	
(1, 221 2 11 2 11 2 11 2 11 2 11 2 11 2				
(c) TOTAL Independent Expenditures			• •	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	Electronically Fil	ed]	M =	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		_ Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 32 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed or	N M M / D D / Y Y Y Y
Full Name of Payee Keith Ablow Creative		☐ Memo	Item [Date of Public Distribution/Dissemination
				10 02 7 2020
Mailing Address 36 Water Street			Į.	Amount
City	State	Zip Code		500.00
Newburyport	MA	01950		Transaction ID : SE.5137 Date of Disbursement or Obligation
Purpose of Expenditure Creative Services Scripts		Category/ Type 004		10 / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office S	Sought: X House District: 21
LOOMER, LAURA, , ,		Oppose		resident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		78701.00	Disburs 2020	ement For: Primary Seneral
	,			Other (specify)
Full Name of Payee Keith Ablow Creative		∐ Memo	Item L	Date of Public Distribution/Dissemination
Mailing Address				10 02 2020
36 Water Street			A	Amount
City	State	Zip Code		500.00
Newburyport	MA	01950		Transaction ID : SE.5147 Date of Disbursement or Obligation
Purpose of Expenditure Creative Services Scripts		Category/ Type 004		10 02 7 2020
Name of Federal Candidate:		A Cummont	06:22	Squaht: Y House District: 27
SALAZAR, MARIA ELVIRA, , ,		Support Oppose	Office S	resident Senate State: FL
Calendar Year-To-Date				ement For: Primary X General
Per Election for Office Sought		19200.00	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				1000.00
(h) OUDTOTAL of Unitersity of Index and on Francisch			Г	
(b) SUBTOTAL of Unitemized Independent Expenditure	'es		•	7 7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	Electronically Fil	edl -	M = M	/ D D / Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 33 OF 64		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X		
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼		
,				C C00623421		
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y		
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination		
Keith Ablow Creative				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 36 Water Street	Amo	unt				
City	State	Zip Code	-	500.00		
Newburyport	MA	01950		saction ID : SE.5165 of Disbursement or Obligation		
Purpose of Expenditure Creative Services Scripts		Category/ Type 004		10 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		✗ Support	Office Soug	ht: K House District: 03		
RODIMER, DAN, , ,		Oppose	Presid	NIV/		
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	15600.00	Disburseme			
Full Name of Payer	,	Memo		Other (specify) ▶ of Public Distribution/Dissemination		
Full Name of Payee Media Bridge LLC	item Date	M M / D D / Y Y Y Y				
Mailing Address			l	09 28 2020		
200 Lake Front Drive, #200			Amo	unt		
City	State	Zip Code	-	8000.00		
Mineral	VA 23117			Transaction ID : SE.5092 Date of Disbursement or Obligation		
Purpose of Expenditure Ad Production		Category/ Type 004		10 / 01 / 2020		
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District: 21		
LOOMER, LAURA, , ,		Oppose	Presid			
Calendar Year-To-Date		34533.00	Disburseme	ent For: 🗶 Primary General		
Per Election for Office Sought	7 7	34333.00	2020	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
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 Fil	ed1	M = M /	D D / Y Y Y Y Y		
Signature	zacaonicany Pil	Date	9 01	28 2021		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 34 OF 64		
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X		
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼		
				C C00623421		
Check if 24-hour report 48-hour report	New repo	ort Amends repo		W W / D D / Y Y Y Y		
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination		
Media Bridge LLC				09 / 29 / 2020		
Mailing Address 200 Lake Front Drive, #200	Amo	unt				
City	State	Zip Code	$ \Gamma$	7600.00		
Mineral	VA	23117		saction ID : SE.5093 of Disbursement or Obligation		
Purpose of Expenditure Ad Brokerage	,	Category/ Type 004		10 01 2020		
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District: 21		
LOOMER, LAURA, , ,		Oppose	Presid			
Calendar Year-To-Date Per Election for Office Sought	7	26100.00	Disburseme	ont For: Primary X General Other (specify) ▶		
Full Name of Payee		Memo		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				09 28 2020		
200 Earlo 1 1011 21110, 11200			Amo	unt		
City	State	Zip Code		3000.00		
Mineral	VA	23117		nsaction ID : SE.5098 of Disbursement or Obligation		
Purpose of Expenditure Ad Production		Category/ Type 004		10 / D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate:		x Support	Office Soug	ht: K House District: 03		
BOEBERT, LAUREN, , ,		Oppose	Presid	dent Senate State: CO		
Calendar Year-To-Date		9500.00	Disburseme	ent For: Primary Seneral		
Per Election for Office Sought	T T	000.00	2020	Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures						
(b) SUBTOTAL of Unitemized Independent Expenditures						
(c) TOTAL Independent Expenditures						
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 Fil	odl	M = M /	DED / YEYEYE		
Signature	ъссновисану Е и	Date	9 01	28 2021		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 35 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payer		□ Mome	Itom Date	of Public Distribution/Dissemination
Full Name of Payee Media Bridge LLC		∐ Memo	item Date	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			Amo	unt
City	State	Zip Code	-	1000.00
Mineral	VA	23117		saction ID : SE.5099 of Disbursement or Obligation
Purpose of Expenditure Ad Brokerage		Category/ Type 004		10 01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ght: X House District: 03
BOEBERT, LAUREN, , ,		Oppose	Presi	dent Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7 1 7	10500.00	Disburseme 2020	ent For: Primary
Full Name of Payee		☐ Memo	Item 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			Amo	unt
City	State	Zip Code	-	5500.00
Mineral	VA	23117		nsaction ID : SE.5102 of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004		10 01 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sou	ght: X House District: 01
SHEDD, TIFFANY, , ,		Oppose	Presi	dent Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	1 1 1	13500.00	Disburseme 2020	ent For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		• <u>[</u>	6500.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			• [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		·
Edwards, Paula, , ,	[Electronically File	led1	M = M	D D / Y Y Y Y Y
Signature		_ Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 36 OF 64
NAME OF COMMITTEE (In Full)			FEC	FOR LINE 24 OF FORM 3X IDENTIFICATION NUMBER ▼
American Liberty Fund			C	C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date of Pul	olic Distribution/Dissemination
Media Bridge LLC			M M M	/ D D / Y Y Y Y Y Y 2020
Mailing Address 200 Lake Front Drive, #200	Amount			
City	State	Zip Code		1600.00
Mineral	VA	23117		n ID : SE.5103 bursement or Obligation
Purpose of Expenditure Ad Brokerage		Category/ Type 004	M = M	01 2020
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	7 1 1 7	15100.00	Disbursement For: 2020 Other (Primary ✓ General (specify) ✓
Full Name of Payee		☐ Memo	Item Date of Pul	olic Distribution/Dissemination
Media Bridge LLC			09	/ 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		5500.00
Mineral	VA	23117	Transaction	on ID : SE.5106 bursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004	M = M	01 2020
Name of Federal Candidate:		✗ Support	Office Sought:	➤ House District:03
RODIMER, DAN, , ,		Oppose	President	Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7	13500.00	Disbursement For: 2020 Other (Primary X General (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		·	7100.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		>	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	ledl -	M M / D 29	
Signature		Date	9 01 28	2021

TEMIZED INDEPENDENT EXPENDITURES			PAGE 37 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
American Liberty Fund			
			C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Media Bridge LLC			09 28 2020
Mailing Address 200 Lake Front Drive, #200			Amount
		1	
City	State	Zip Code	1600.00
Mineral	VA	23117	Transaction ID : SE.5108 Date of Disbursement or Obligation
Purpose of Expenditure Ad Brokerage		Category/ Type 004	10 01 7 2020
Name of Federal Candidate:		X Support	Office Sought: House District: 03
RODIMER, DAN, , ,		Oppose	President Senate State: NV
Calendar Year-To-Date		15100.00	Disbursement For: Primary General
Per Election for Office Sought	7-1-1-7	15100.00	2020
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Media Bridge LLC			09 28 / 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.5111 Date of Disbursement or Obligation
Purpose of Expenditure Ad Production	•	Category/	10 01 Y Y Y Y Y
7.4.1.10000.10.11		Type 004	10 01 2020
Name of Federal Candidate:		🗶 Support	Office Sought: House District: 02
CRAFTS, DALE, , ,		Oppose	President Senate State: ME
Calendar Year-To-Date		12000.00	Disbursement For: Primary General
Per Election for Office Sought	7 7		2020 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	S		4600.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized		
Edwards, Paula, , ,	[Electronically Fil	[ed]	Mam / Dab / Yayaya
Signature	_L zaca omeany I u	_ Date	01 28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 38 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M - M / D - D / Y - Y - Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Media Bridgé 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			Amo	unt
City	State	Zip Code	— F	1000.00
Mineral	VA	23117		saction ID : SE.5112 of Disbursement or Obligation
Purpose of Expenditure Ad Brokerage		Category/ Type 004		M M / D D / Y Y Y Y Y 1 Y 10 10 10 10 10 10 10 10 10 10 10 10 10
Name of Federal Candidate:		X Support	Office Soug	ht: X House District: 02
CRAFTS, DALE, , ,		Oppose	Presi	dent Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7 1 7	13000.00	Disburseme	ent For: Primary
Full Name of Payee		☐ Memo	Item 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			Amo	unt
City	State	Zip Code		1000.00
Mineral	VA	23117		nsaction ID : SE.5141 of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004		M M / D D / Y Y Y Y Y 10 10 10 10 10 10 10 10 10 10 10 10 10
Name of Federal Candidate:		✗ Support	Office Soug	ht: K House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Presi	dent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 7	12000.00	Disburseme 2020	ent For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	;			2000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	ledl –	M = M /	D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 39 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
·				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Media Bridge LLC				10 01 / 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			Amo	punt
City	State	Zip Code	-	1600.00
Mineral	VA	23117		nsaction ID : SE.5145 e of Disbursement or Obligation
Purpose of Expenditure Ad Brokerage		Category/ Type 004		10 01 / 2020
Name of Federal Candidate:		✗ Support	Office Sou	ght: K House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Pres	ident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	13600.00	Disburseme 2020	ent For:
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Media Bridge LLC				10 01 / 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			Amo	punt
City	State	Zip Code	-	600.00
Mineral	VA	23117		nsaction ID : SE.5146 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y
Digital Advertising		Type 004		10 01 2020
Name of Federal Candidate:		✗ Support	Office Sou	<u> </u>
SALAZAR, MARIA ELVIRA, , ,		Oppose	Pres	ident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	1 1 1	14200.00	Disburseme 2020	ent For: Primary X General Other (specify) ▶
	,			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· • [2200.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • [
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		·
Edwards, Paula, , ,	[Electronically File	ed] Date	M M M M	28 2021
Signature			, <u> </u>	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 40 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
7 unionican Electry 1 and				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item C	Pate of Public Distribution/Dissemination
Media Bridge LLC				10 01 / 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			А	mount
City	State	Zip Code		600.00
Mineral	VA	23117		ransaction ID : SE.5167 tate of Disbursement or Obligation
Purpose of Expenditure Ad Production	I	Category/ Type 004		10 01 2020
Name of Federal Candidate:		✗ Support	Office S	rought: X House District:03
BOEBERT, LAUREN, , ,		Oppose		resident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	14100.00	Disburse 2020	ement For: Primary General Other (specify) ▶
Full Name of Payee		Memo	Itom [pate of Public Distribution/Dissemination
Media Bridge LLC		_ метто	item 2	M M / D D / Y Y Y Y
Mailing Address 200 Lake Front Drive, #200				10 01 2020
200 Lake Fiort Dilve, #200			Д	mount
City	State	Zip Code		4500.00
Mineral	VA	23117		Transaction ID : SE.6690 Pate of Disbursement or Obligation
Purpose of Expenditure Digital Advertising	•	Category/ Type		10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office S	lought: X House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Pi	resident Senate State: FL
Calendar Year-To-Date		19700 00		ement For: Primary X General
Per Election for Office Sought	7	18700.00	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	5100.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	Electronically Fil	edl -	M = M	/ D D / Y Y Y Y
Signature		Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 41 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
,				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Media Bridge LLC				10 01 / 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			Amo	unt
City	State	Zip Code	-	1000.00
Mineral	VA	23117		nsaction ID : SE2147483645 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 / 01 / 2020
Name of Federal Candidate:		✗ Support	Office Sou	ght: X House District: 01
SHEDD, TIFFANY, , ,		Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought	7	21100.00	Disburseme	ent For: Primary X General Other (specify) ▶
Full Name of Payee		Memo		e of Public Distribution/Dissemination
Media Bridge LLC				10 02 / 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				10 02 2020
,			Amo	unt
City	State	Zip Code		600.00
Mineral	VA	23117		nsaction ID : SE.5129 e of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		M 10 / D D / Y Y Y Y Y 1
Name of Federal Candidate:		x Support	Office Sou	ght: 🗶 House District: 21
LOOMER, LAURA, , ,		Oppose	Presi	dent Senate State: FL
Calendar Year-To-Date		29700.00	Disburseme	ent For: Primary Seneral
Per Election for Office Sought	7-1-1-5-		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	1600.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
Edwards, Paula, , ,	Electronically Fil	ed1	M = M	/ D D / Y Y Y Y
Signature	ъсы опишну Г н	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 42 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Media Bridge LLC				10 02 / 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			Amo	punt
City	State	Zip Code		2500.00
Mineral	VA	23117		nsaction ID : SE.5130 e of Disbursement or Obligation
Purpose of Expenditure Digital Advertising	,	Category/ Type 004		10
Name of Federal Candidate:		X Support	Office Sou	ght: X House District: 21
LOOMER, LAURA, , ,		Oppose		ident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	32200.00	Disbursem 2020	ent For:
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Media Bridge LLC				10 02 / 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			Amo	ount
City	State	Zip Code	— г	1.00
Mineral	VA	23117		nsaction ID : SE.5134
Purpose of Expenditure		Category/		e of Disbursement or Obligation
Digital Advertising		Type 004		10 02 2020
Name of Federal Candidate:		🗶 Support	Office Sou	ght: House District: 21
LOOMER, LAURA, , ,		Oppose	Pres	ident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		72201.00	Disbursem 2020	,
	1 1 1			Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures				2501.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res			
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	led1 -	M = M	/ D D / Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 43 OF 64
NAME OF COMMITTEE (In Full)			1,	FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date of	Public Distribution/Dissemination
Media Bridge LLC		_ Memo	M	02 / 2020
Mailing Address 200 Lake Front Drive, #200			Amount	
City	State	Zip Code		2000.00
Mineral	VA	23117		ction ID : SE.5135 Disbursement or Obligation
Purpose of Expenditure Ad Production	ı	Category/ Type 004	М	10
Name of Federal Candidate:		✗ Support	Office Sought:	: X House District: 21
LOOMER, LAURA, , ,		Oppose	Presider	nt Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 1 7	74201.00	Disbursement 2020 Otl	For: Primary X General ner (specify) ▶
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Media Bridge LLC				10 02 / 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		4000.00
Mineral	VA	23117		action ID : SE.5136 Disbursement or Obligation
Purpose of Expenditure Ad Brokerage		Category/ Type 004	М	10
Name of Federal Candidate:		✗ Support	Office Sought:	House District: 21
LOOMER, LAURA, , ,		Oppose	Presider	nt Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7	78201.00	Disbursement 2020 Otl	For: Primary X General ner (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;			6000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	edl –	M = M /	2024
Signature		Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 44 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
Media Bridge LLC				10 02 / 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			Ar	nount
City	State	Zip Code	-	10000.00
Mineral	VA	23117		ansaction ID : SE.6686 ate of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type		M M M / 02 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sc	ought: X House District: 21
LOOMER, LAURA, , ,		Oppose		esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 7	88701.00	Disburse 2020	ment For:
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Media Bridge LLC				10 03 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			Ar	nount
		I		
City	State	Zip Code		1000.00 ransaction ID : SE2147483644
Mineral	VA	23117		ate of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 / 03 / 2020
Name of Federal Candidate:		x Support	Office Sc	ought: House District: 01
SHEDD, TIFFANY, , ,		Oppose	Pre	esident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		22100.00	Disburse 2020	ment For: Primary
				Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	í			11000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	edl -	M = M	/ D D / Y Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 45 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y N Y N Y
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Media Bridge LLC		_ Memo	Kom	10 03 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			Amou	ınt
City	State	Zip Code	— I I I	600.00
Mineral	VA	23117		saction ID : SE2147483626 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District: 03
RODIMER, DAN, , ,		Oppose	Presid	lent Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	19200.00	Disbursement 2020	nt For: Primary
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Media Bridge LLC			[10 05 / 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			Amou	ınt
City	State	Zip Code	— Г	2000.00
Mineral	VA	23117		saction ID : SE2147483635 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 05 7 2020
Name of Federal Candidate:		x Support	Office Soug	ht: X House District: 13
HAGAN, CHRISTINA, , ,		Oppose	Presid	lent Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 7	12000.00	Disbursement 2020	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	·		· [2600.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	7
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	ed1	M = M /	D D / Y Y Y Y Y
Signature	I	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 46 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Media Bridge LLC			[10 05 / 2020
Mailing Address 200 Lake Front Drive, #200			Amou	unt
City	State	Zip Code	$ \Gamma$	1000.00
Mineral	VA	23117		saction ID : SE2147483631 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	— I r	10 05 / 2020
Name of Federal Candidate:		✗ Support	Office Soug	ht: X House District: 02
CRAFTS, DALE, , ,		Oppose	Presid	ME
Calendar Year-To-Date Per Election for Office Sought	T 1 1 T	19000.00	Disburseme	ont For:
Full Name of Payee		Memo		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				10 00 2020
			Amoi	unt
City	State	Zip Code		600.00
Mineral	VA	23117		nsaction ID : SE2147483629 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Soug	ht: X House District:02
CRAFTS, DALE, , ,		Oppose	Presid	dent Senate State: ME
Calendar Year-To-Date		22600.00	Disburseme	ent For: Primary General
Per Election for Office Sought	7-1-1-5-		2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [1600.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •	7 1 7 1 7
(c) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		•
Edwards, Paula, , ,	Electronically Fil	od1	M _ M _ /	DED / YEYEYE
Signature	ъсы опишну Г н	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 47 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M - M / D - D / Y - Y - Y
Full Name of Payee		Memo	Item Dat	e of Public Distribution/Dissemination
Media Bridgé 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			Am	ount
City	State	Zip Code	— F	1000.00
Mineral	VA	23117		nsaction ID : SE2147483624 e of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ight: X House District:03
RODIMER, DAN, , ,		Oppose	Pres	sident Senate State: NV
Calendar Year-To-Date Per Election for Office Sought	7 1 7	25200.00	Disbursem 2020	nent For:
Full Name of Payee		☐ Memo	Item Dat	e 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			Am	ount
City	State	Zip Code	— г	2000.00
Mineral	VA	23117		ansaction ID : SE2147483621 e of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 05 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sou	ight: X House District:17
KING, ESTHER JOY, , ,		Oppose	Pres	sident Senate State: IL
Calendar Year-To-Date Per Election for Office Sought	7 1 7	12000.00	Disbursem 2020	nent For:
(a) SUBTOTAL of Itemized Independent Expenditures	\$			3000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	ledl –	M = M	/ D D / Y Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 48 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
·				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Media Bridge LLC			[10 / 05 / 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			Amo	unt
City	State	Zip Code		1000.00
Mineral	VA	23117		of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	_	M 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	Office Soug	aht: X House District: 27
SALAZAR, MARIA ELVIRA, , ,		Oppose	Presi	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	25200.00	Disburseme	ent For: Primary X General Other (specify) ▶
Full Name of Payee		Memo		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			Ama	
			Amo	unt
City	State	Zip Code		1000.00
Mineral	VA	23117		nsaction ID : SE2147483566 of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004		M 10 / 05 / Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Soug	ght: K House District: 03
BOEBERT, LAUREN, , ,		Oppose	Presi	dent Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		20100.00	Disburseme	
	1			Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	;		· [2000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· [
(c) TOTAL Independent Expenditures			· [
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized	•		•
Edwards, Paula, , ,	[Electronically Fil	ed] Date	e 01	28 2021
Signature	-		, ,,	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 49 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	/ D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Media Bridge LLC				10 06 / 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			Amou	unt
City	State	Zip Code	$ \Gamma$	1000.00
Mineral	VA	23117		saction ID : SE2147483610 of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004	_	10 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		Support	Office Soug	ht: X House District: 21
LOOMER, LAURA, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7	89701.00	Disburseme	nt For: Primary X General Other (specify) ▶
Full Name of Payee		Memo		of Public Distribution/Dissemination
Media Bridge LLC		Wemo	nem 2 and	10 06 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				10 00 2020
200 2410 1 1011 21110, 11200			Amou	unt
City	State	Zip Code	— F.	2500.00
Mineral	VA	23117		saction ID : SE2147483607 of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004		10 06 7 2020
Name of Federal Candidate:		Support	Office Soug	ht: K House District: 21
FRANKEL, LOIS J., , ,		x Oppose	Presid	dent Senate State: FL
Calendar Year-To-Date		92201.00	Disburseme	nt For: Primary X General
Per Election for Office Sought	7-1-1-5-		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· -	3500.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· -	
(c) TOTAL Independent Expenditures			· [7 7 7
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized	•		· · · · · · · · · · · · · · · · · · ·
Edwards, Paula, , ,	Electronically Fil	ed1	M = M /	DID / YIYIY
Signature		Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 50 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M / D D / Y Y Y Y
Full Name of Payee Media Bridge LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
				10 06 7 2020
Mailing Address 200 Lake Front Drive, #200			Amou	nt
City	State	Zip Code	$-\Gamma$	500.00
Mineral	VA	23117		action ID : SE2147483605 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	- N	10 06 2020
Name of Federal Candidate:		Support	Office Sough	nt: National Marketine Mar
FRANKEL, LOIS J., , ,		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7	92701.00	Disbursemen 2020 C	t For: Primary ✗ General wither (specify) ▶
Full Name of Payee		☐ Memo		of Public Distribution/Dissemination
Media Bridge LLC			T.	10 07 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			Amou	
			Alliou	
City	State	Zip Code	Trans	2857.00
Mineral	VA	23117		saction ID : SE.5213 of Disbursement or Obligation
Purpose of Expenditure Ad Production		Category/ Type 004		10 / 07 / 2020
Name of Federal Candidate:		✗ Support	Office Sough	t: Nouse District: 21
LOOMER, LAURA, , ,		Oppose	Preside	ent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		95558.00	Disbursemen	, ,
	1 1			ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	3357.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	edl -	M = M /	20 / Y Y Y Y Y
Signature	comonicumy 1 th	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 51 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FI	EC IDENTIFICATION NUMBER ▼
American Liberty Fund			l le	
				C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	rt filed on	M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Media Bridge LLC			10	
Mailing Address 200 Lake Front Drive, #200				
			Amount	
City	State	Zip Code		2000.00
Mineral	VA	23117		tion ID: SE.5215 Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	M	M / D D / Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sought:	₩ House District: 21
LOOMER, LAURA, , ,		Oppose	President	
Calendar Year-To-Date			Disbursement F	For: Primary X General
Per Election for Office Sought	7-1-7-	107558.00	2020 Othe	er (specify) ►
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Media Bridge LLC			M 10	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				07 2020
200 Lake Front Blive, #200			Amount	
City	State	Zip Code		1957.00
Mineral	VA	23117		etion ID: SE.5223 Disbursement or Obligation
Purpose of Expenditure		Category/	M	M / D D / Y Y Y
Digital Advertising/Ad Production		Type 004		07 2020
Name of Federal Candidate:		✗ Support	Office Sought:	₩ House District: 13
HAGAN, CHRISTINA, , ,		Oppose	President	Senate State: OH
Calendar Year-To-Date		21957.00	Disbursement F	For: Primary General
Per Election for Office Sought	7 7	21937.00	2020 Othe	er (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	3		·	3957.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7
(c) TOTAL Independent Expenditures			·	7 1 7 1 7 1
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	[ed]		28 2021
Signature	<u> </u>	Date	01	2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 52 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		= M / D = D / Y = Y = Y
Full Name of Payee		Memo	Item Date of	of Public Distribution/Dissemination
Media Bridgé LLC				10 07 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			Amou	nt
City	State	Zip Code	— IT.	1957.00
Mineral	VA	23117		action ID : SE.5239 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	N	10 07 2020
Name of Federal Candidate:		✗ Support	Office Sough	t: X House District:17
KING, ESTHER JOY, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 7	21957.00	Disbursemen 2020 O	t For: Primary X General ther (specify) ▶
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Media Bridge LLC			N	10 07 / 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			Amou	nt
City	State	Zip Code		1357.00
Mineral	VA	23117		saction ID : SE.5248 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising/Ad Production		Category/ Type 004	N	10 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		x Support	Office Sough	it: K House District: 03
BOEBERT, LAUREN, , ,		Oppose	Preside	ent Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	29925.00	Disbursemen 2020 O	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			•	3314.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	Electronically Fil	edl –	M M /	20 / Y Y Y Y Y
Signature	omeany 1 ti	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES			PAGE 53 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
American Liberty Fund			
			C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Media Bridge LLC			10 07 / Y Y Y Y Y
Mailing Address 200 Lake Front Drive, #200			Amount
		1	
City	State	Zip Code	1357.00
Mineral	VA	23117	Transaction ID : SE.5253 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising/Ad Production		Category/ Type 004	10 07 7 2020
Name of Federal Candidate:		✗ Support	Office Sought: House District: 01
SHEDD, TIFFANY, , ,		Oppose	President Senate State: AZ
Calendar Year-To-Date		2025 00	Disbursement For: Primary
Per Election for Office Sought	7 7	36925.00	2020
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Media Bridge LLC			10 07 / Y Y Y Y Y
Mailing Address 200 Lake Front Drive, #200			
,			Amount
City	State	Zip Code	1357.00
Mineral	VA	23117	Transaction ID : SE.5270 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising/Ad Production	-	Category/	M M / D D / Y Y Y Y
Digital Advertising/Ad Froduction		Type 004	10 07 2020
Name of Federal Candidate:		🗶 Support	Office Sought: House District: 02
CRAFTS, DALE, , ,		Oppose	President Senate State: ME
Calendar Year-To-Date		35893.00	Disbursement For: Primary General
Per Election for Office Sought	7 7	00000.00	2020 ☐ Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	S		2714.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· •
(c) TOTAL Independent Expenditures			· •
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candid party committee) any political party committee or its	ate or authorized		
Edwards, Paula, , ,	[Electronically Fil	led1	M M / D D / Y Y Y Y
Signature	_L zaca omeany I u	Date	9 01 28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 54 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
			-	M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo		
Full Name of Payee Media Bridge LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
<u> </u>				10 07 7 2020
Mailing Address 200 Lake Front Drive, #200			Amo	unt
City	State	Zip Code	$ \Gamma$	1357.00
Mineral	VA	23117		saction ID : SE.5271
Purpose of Expenditure Digital Advertising/Ad Production	<u> </u>	Category/ Type 004		of Disbursement or Obligation 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	Office Soug	aht: X House District: 03
RODIMER, DAN, , ,		Oppose	Presi	
Calendar Year-To-Date		00557.00	Disburseme	ent For: Primary Seneral
Per Election for Office Sought	7 7	26557.00	2020	Other (specify) ▶
Full Name of Payee Media Bridge LLC		☐ Memo	Item Date	of Public Distribution/Dissemination
Wedia Bridge ELC				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			Amo	unt
City	State	Zip Code		1000.00
Mineral	VA	23117	Trai	nsaction ID : SE.5296
Purpose of Expenditure			Date	of Disbursement or Obligation
Digital Advertising		Category/ Type 004		10 07 7 2020
Name of Federal Candidate:		✗ Support	Office Soug	ght: House District: 01
SHEDD, TIFFANY, , ,		Oppose	Presi	dent Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		37925.00	Disburseme	ent For: Primary General
1 et Election foi Office Sought	7		2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. 🕝	2257.00
(a) SOBTOTAL of itemized independent expenditures			•	2357.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· • [
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	ledl –	M = M /	20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES			PAGE 55 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼
American Liberty Fund			C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
Media Bridgé LLC			10 08 7 2020
Mailing Address 200 Lake Front Drive, #200			Amount
City	State	Zip Code	2000.00
Mineral	VA	23117	Transaction ID : SE.5225 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	M M / D D / Y Y Y Y
Name of Federal Candidate:		X Support	Office Sought:
CRAFTS, DALE, , ,		Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7 7	37893.00	Disbursement For: ☐ Primary X General 2020 ☐ Other (specify) ▶
Full Name of Payee		Memo	Item Date of Public Distribution/Dissemination
Media Bridge LLC		_	10 08 7 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	2000.00
Mineral	VA	23117	Transaction ID : SE.5230 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising/Ad Production		Category/ Type 004	M M / D D / Y Y Y
Name of Federal Candidate:		x Support	Office Sought: House District: 13
HAGAN, CHRISTINA, , ,		Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	7 7	33957.00	Disbursement For: ☐ Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			. • 4000.00
(b) SUBTOTAL of Unitemized Independent Expenditure	705		
(b) 305101AL of Officernized independent Experiation	C3		
(c) TOTAL Independent Expenditures			•
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized		
Edwards, Paula, , ,	Electronically Fil	ed]	e 01 28 2021
Signature		_ Date	e 01 28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 56 OF 64 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Media Bridge LLC				10 08 / 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			Δπ	nount
		1		
City	State	Zip Code		2000.00
Mineral	VA	23117		ansaction ID : SE.5237 te of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	1	10 08 7 2020
Name of Federal Candidate:		X Support	Office So	ught: X House District: 17
KING, ESTHER JOY, , ,		Oppose	Pre	sident Senate State: IL
Calendar Year-To-Date		00057.00	Disburser	nent For: Primary Seneral
Per Election for Office Sought	7 7	23957.00	2020	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Media Bridge LLC				10 08 7 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				
			Am	nount
City	State	Zip Code		2000.00
Mineral	VA	23117		ansaction ID : SE.5249 te of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/		10 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Type 004		10 00 2020
Name of Federal Candidate:		x Support	Office So	•
BOEBERT, LAUREN, , ,		Oppose	Pre	sident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought		41925.00	Disburser	nent For: Primary Seneral
Per Election for Office Sought	7-1-5-		2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	S		· • _	4000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	roe			
(b) 300101AE of Officernized Independent Experiality	163		•	
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Flootronically F:1	led1	M = M	/ DPD / YPYPY
Signature	[Electronically Fil	eaj Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITUR	RES			PAGE 57 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Media Bridge LLC				10 08 / 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			A	
			Amo	ount
City	State	Zip Code		1600.00
Mineral	VA	23117		nsaction ID : SE.5290 e of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		X Support	Office Sou	ght: X House District: 03
RODIMER, DAN, , ,		Oppose	Pres	
Calendar Year-To-Date			Disbursem	ent For: Primary X General
Per Election for Office Sought		28157.00	2020	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Media Bridge LLC				M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
Mailing Address 200 Lake Front Drive, #200				10 00 2020
200 2410 11011 21110, 1/200			Amo	ount
City	State	Zip Code		1200.00
Mineral	VA	23117		nsaction ID : SE.5241 e of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y Y
Digital Advertising		Type 004		10 09 2020
Name of Federal Candidate:		✗ Support	Office Sou	ght: X House District: 17
KING, ESTHER JOY, , ,		Oppose	Pres	ident Senate State: IL
Calendar Year-To-Date		41157.00	Disbursem	ent For: Primary X General
Per Election for Office Sought		41137.00	2020	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expendi	tures		• •	2800.00
(b) SUBTOTAL of Unitemized Independent Expe	nditures		· • L	
(c) TOTAL Independent Expenditures				
(c) TOTAL independent Experiences				
Under penalty of perjury I certify that the indep	pendent expenditures	reported herein were	not made ir	cooperation, consultation, or concert
with, or at the request or suggestion of, any caparty committee) any political party committee of	andidate or authorized			
Edwards, Paula, , ,	(FI / 11 TO	111	M = M	/ D D / Y Y Y Y
Signature	[Electronically Fil	ded J Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 58 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo		M = M / D = D / Y = Y = Y
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Media Bridge LLC				10 09 / 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			Amo	punt
City	State	Zip Code		1.00
Mineral	VA	23117		nsaction ID : SE.5244 e of Disbursement or Obligation
Purpose of Expenditure Video Production	1	Category/ Type 004		10 / 09 / 2020
Name of Federal Candidate:		✗ Support	Office Sou	ght: X House District: 21
LOOMER, LAURA, , ,		Oppose	Pres	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	127559.00	Disburseme	ent For: Primary ✓ General Other (specify) ✓
Full Name of Payee		☐ Memo	Item Date	e 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				10 09 2020
			Amo	punt
City	State	Zip Code		1268.00
Mineral	VA	23117		nsaction ID : SE.5250 e of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 09 / 2020
Name of Federal Candidate:		x Support	Office Sou	ght: X House District: 03
BOEBERT, LAUREN, , ,		Oppose	Pres	ident Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	A 1 1 A	49533.00	Disburseme 2020	ent For: Primary X General Other (specify) ▶
				Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	í		• [1269.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· -	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically File	ledl –	M = M	/ D D / Y Y Y Y Y
Signature		Date	e 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES			PAGE 59 OF 64	
NAME OF COMMITTEE (In Full)			FOR LINE 24 OF FORM FEC IDENTIFICATION NUMBER	
American Liberty Fund				
			C C00623421	
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on M M M / D D / Y Y Y Y	Υ
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination	n
Media Bridgé LLC			10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Υ
Mailing Address 200 Lake Front Drive, #200				_
			Amount	_
City	State	Zip Code	5800.00	
Mineral	VA	23117	Transaction ID: SE.5254 Date of Disbursement or Obligation	
Purpose of Expenditure Digital Advertising/Video Production		Category/ Type 004	M M / D D / Y Y Y	Y
Name of Federal Candidate:		✗ Support	Office Sought: House District: 01	1
SHEDD, TIFFANY, , ,		Oppose	President Senate State: AZ	z
Calendar Year-To-Date		1-1-1-1	Disbursement For: Primary X Gene	eral
Per Election for Office Sought	7	52725.00	2020 ☐ Other (specify) ▶	
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination	n
Media Bridge LLC			10 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	Υ
Mailing Address 200 Lake Front Drive, #200				_
,			Amount	_
City	State	Zip Code	2000.00	
Mineral	VA	23117	Transaction ID: SE.5257 Date of Disbursement or Obligation	
Purpose of Expenditure Ad Production	•	Category/	M M / D D / Y Y Y	Υ
7.d 1 Toddolloll		Type 004	10 09 2020	
Name of Federal Candidate:		Support	Office Sought: House District: 21	1
FRANKEL, LOIS J., , ,		x Oppose	President Senate State: FL	
Calendar Year-To-Date		139559.00	Disbursement For: Primary	eral
Per Election for Office Sought	7 7	100000.00	2020 ☐ Other (specify) ►	
(a) SUBTOTAL of Itemized Independent Expenditures	\$. > 7800.00	
(b) SUBTOTAL of Unitemized Independent Expenditu	res		>	Ш
(c) TOTAL Independent Expenditures			· •	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidaparty committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	led1	M M / D D / Y Y Y Y	
Signature	₁ 2лсы описшу Г и	Date	e 01 28 2021	

TEMIZED INDEPENDENT EXPENDITURES	S			PAGE 60 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼
·				C C00623421
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	"M / D D / Y Y Y Y Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Media Bridgé LLC				10 09 7 2020
Mailing Address 200 Lake Front Drive, #200			Amou	nt
City	State	Zip Code		4366.00
Mineral	VA	23117		saction ID : SE.5316 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	- N	10 / 09 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sough	nt: X House District: 13
HAGAN, CHRISTINA, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	60156.00	Disbursemen 2020 C	nt For: Primary
Full Name of Payee		Memo		of Public Distribution/Dissemination
Media Bridge LLC			N	10 D / Y Y Y Y
Mailing Address 200 Lake Front Drive, #200				10 09 2020
200 Lake Flort Drive, #200			Amou	nt
City	State	Zip Code		15500.00
Mineral	VA	23117		saction ID : SE.6688 of Disbursement or Obligation
Purpose of Expenditure Video Production		Category/ Type		10 09 / 2020
Name of Federal Candidate:		x Support	Office Sough	nt: Nouse District: 21
LOOMER, LAURA, , ,		Oppose	Preside	ent Senate State: FL
Calendar Year-To-Date		155059.00	Disbursemen	nt For: Primary 🗶 General
Per Election for Office Sought	7 7	133039.00	2020 🗌 c	other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es		.	19866.00
(b) SUBTOTAL of Unitemized Independent Expendit	tures		· •	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candic party committee) any political party committee or it	date or authorized	•		
Edwards, Paula, , ,	[Electronically Et	lad1	M = M /	D D / Y T Y T Y
Signature	[Electronically Fil	eaj Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 61 OF 64
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
				M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y
Full Name of Payee Media Bridge LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
				10 13 / 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			Amo	punt
City	State	Zip Code	-	6000.00
Mineral	VA	23117		nsaction ID : SE.5591
Purpose of Expenditure Digital Advertising		Category/ Type 004		e of Disbursement or Obligation 10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:			0111	ght: V House District: 01
SHEDD, TIFFANY, , ,		Support Oppose	Office Sou	grit. A 7
			Disbursem	ideni Senate State.
Calendar Year-To-Date Per Election for Office Sought		118725.00	2020	Other (specify) >
Full Name of Payee		☐ Memo	Item Date	e of Public Distribution/Dissemination
Media Bridge LLC				10 14 2020
Mailing Address 200 Lake Front Drive, #200				
			Amo	
City Mineral	State	Zip Code	Tra	1.00 nsaction ID : SE.5603
	VA	23117		e of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		✗ Support	Office Sou	ght: House District: 21
LOOMER, LAURA, , ,		Oppose	Pres	ident Senate State: FL
Calendar Year-To-Date		305060.00	Disbursem	ent For: Primary General
Per Election for Office Sought	7 7		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			. \Box	6001.00
(a) 302131742 of Refinized Independent Experiation	,			0001.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		· • [
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ate or authorized			
Edwards, Paula, , ,	[Electronically Fil	ledl -	M M	/ D D / Y Y Y Y Y
Signature		Date	e 01	28 2021

NAME OF COMMITTEE (In Full) American Liberty Fund C C00623421	TEMIZED INDEPENDENT EXPENDITURES	•			PAGE 62 OF 64	
American Liberty Fund C	NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X	
Check if 24-hour report	,					
Full Name of Payee Media Broadfates LOOMER, LAURA Name of Payee Memo Item Date of Public Distribution/Dissemination	,				C C00623421	
Media Bridge LLC Mailing Address 200 Lake Front Drive, #200 Amount City Mineral VA 23117 Purpose of Expenditure Digital Advertising Name of Federal Candidate: Calegory/ Type Name of Federal Candidate: Calegory/ Type Oppose President Senate State: FL Calendar Year-To-Date Purpose of Expenditure Disbursement For: Primary IX General 2020 Other (specify) ▶ Memo Item New Journey PAC Mailing Address 7750 Okeechobee Blvd State State State Category/ Type Oppose President Senate State: FL Date of Public Distribution/Dissemination Transaction ID: SE.6869 Date of Disbursement For: Primary IX General 2020 Other (specify) ▶ Amount Transaction ID: SE.6869 Date of Disbursement For: Primary IX General 2020 Other (specify) ▶ Transaction ID: SE.6869 Date of Disbursement For: Primary IX General 2020 Other (specify) ▶ Transaction ID: SE.6869 Date of Disbursement For: Primary IX General 2020 Other (specify) ▶ Transaction ID: SE.6869 Date of Disbursement For: Primary IX General 2020 Other (specify) ▶ Transaction ID: SE.6869 Date of Disbursement or Obligation Date of Disbursement or Disbursement or Disbursement or Date or Date or Date or Date	Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M = M / D = D / Y = Y = Y	
Mailing Address 200 Lake Front Drive, #200 City State Zip Code VA 23117 Purpose of Expenditure Digital Advertising Category/ Type Time of Pederal Candidate:	Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination	
City State Zip Code VA 23117 Transaction ID : \$E.6689 Transaction	Media Bridge LLC					
Mineral VA 23117 Transaction ID : SE.6689 Date of Disbursement or Obligation Purpose of Expenditure Digital Advertising Name of Federal Candidate: LOOMER, LAURA, Calendar Year-To-Date Per Election for Office Sought Purpose of Expenditure Door Knocking Name of Federal Candidate: VX Support Oppose President Senate State: FL Disbursement For: Primary X General 2020 Other (specify) ▶ Full Name of Payee New Journey PAC Mailing Address 7750 Okeechobee Bivd State Zip Code Transaction ID : SE.6689 Amount Transaction ID : SE.6689 Date of Public Distribution/Dissemination New Journey PAC Mailing Address 7750 Okeechobee Bivd State Zip Code Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Public Distribution/Dissemination New Journey PAC Mailing Address 7750 Okeechobee Bivd State Zip Code Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Date of Disbursement or Obligation Transaction ID : SE.5887 Da	Mailing Address 200 Lake Front Drive, #200			Am	ount	
Purpose of Expenditure Digital Advertising Name of Federal Candidate:	City	State	Zip Code	-	10000.00	
Purpose of Expenditure Digital Advertising Name of Federal Candidate: LOOMER, LAURA Calendar Year-To-Date Per Election for Office Sought Full Name of Payee New Journey PAC Mailing Address 7750 Okeechobee Blvd Sie 4-366 City West Palm Beach Purpose of Expenditure Door Knocking Name of Federal Candidate: LOOMER, LAURA Purpose of Expenditure Door Knocking Name of Federal Candidate: LOOMER, LAURA Purpose of Expenditure Door Knocking Name of Federal Candidate: LOOMER, LAURA Oppose Disbursement For: 2020 Other (specify) ▶ Transaction ID: SE.5587 Date of Disbursement or Obligation Transaction ID: SE.5587 Date of Disbursement For: Door Knocking Name of Federal Candidate: LOOMER, LAURA Oppose President Senate State: FL Disbursement For: Primary X General 2020 Other (specify) ▶ Under penalty of perjury I certify that the independent expenditures Per Election for Office Sought 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 Filld] Date Office Sought Transaction ID: \$200 Other (specify) ▶ Amount Transaction ID: \$200 Other (specify) ▶ Sought Transaction ID: \$200 Other (specify) ▶ Sought Transaction ID: \$200 Transaction ID: \$200 Other (specify) ▶ Sought Tra	Mineral	VA	23117			
Calendar Year-To-Date President Senate State: FL Calendar Year-To-Date Per Election for Office Sought 315060.00 Full Name of Payee New Journey PAC Mailing Address 7750 Okeechobee Bivd State Stat					M M / D D / Y Y Y Y	
LOOMER, LAURA,	Name of Federal Candidate:		X Support	Office Sou	ught: X House District: 21	
Per Election for Office Sought State Zip Code Transaction ID: SE.5587 Date of Disbursement or Obligation Date of Public Distribution/Dissemination Date of Disbursement or Obligation Disbursement Disbursemen	LOOMER, LAURA, , ,					
New Journey PAC Mailing Address 7750 Okeechobee Bivd Ste 4-366 City West Palm Beach Purpose of Expenditure Door Knocking Name of Federal Candidate: LOOMER, LAURA, ,		7 7	315060.00			
Mailing Address 7750 Okeechobee Blvd Ste 4-366 City West Palm Beach Purpose of Expenditure Door Knocking Name of Federal Candidate: LOOMER, LAURA, ,	Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination	
Mailing Address 7750 Okeechobee Blvd Ste 4-366 City West Palm Beach Purpose of Expenditure Door Knocking Name of Federal Candidate: LOOMER, LAURA, ., Calendar Year-To-Date Per Election for Office Sought Calendar Year-To-Date Per Election for Office Sought (a) SUBTOTAL of Unitemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures 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. Amount					10 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Ste 4-366 City West Palm Beach Purpose of Expenditure Door Knocking Name of Federal Candidate: LOOMER, LAURA Calendar Year-To-Date Per Election for Office Sought (c) TOTAL Independent Expenditures 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. Amount Transaction ID : SE.5587 Date of Disbursement or Obligation Transaction ID : Se.5587 Date of Disbursement or Obligation Transaction ID : Se.5587 Date of Disbursement or Obligati	Mailing Address 7750 Okeechobee Blvd					
West Palm Beach Purpose of Expenditure Door Knocking Category/ Type O04 Name of Federal Candidate: LOOMER, LAURA, .	Ste 4-366			Am	ount	
West Palm Beach Purpose of Expenditure Door Knocking Name of Federal Candidate: LOOMER, LAURA, , Oppose Per Election for Office Sought Calegnary Office Sought Senate State: FL Calendar Year-To-Date Per Election for Office Sought 205059.00 Disbursement For: Primary General 2020 Other (specify) Other (specify) (a) SUBTOTAL of Unitemized Independent Expenditures Other (specify) Other (specify) Under penalty of perjury 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. Electronically Filed Date Other Other	City	State	Zip Code			
Door Knocking Name of Federal Candidate:	1.00.1.	FL	33411		ansaction ID : SE.5587	
LOOMER, LAURA, , ,						
Calendar Year-To-Date Per Election for Office Sought 205059.00 Disbursement For: Primary X General 2020 Other (specify) > (a) SUBTOTAL of Itemized Independent Expenditures	Name of Federal Candidate:		x Support	Office Sou	ught: 🗶 House District: 21	
Per Election for Office Sought 205059.00 2020 Other (specify) ▶ (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures (c) TOTAL Independent Expenditures 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 Other (specify) ▶ 60000.00	LOOMER, LAURA, , ,		Oppose	Pres	sident Senate State: FL	
(a) SUBTOTAL of Itemized Independent Expenditures			205059.00			
(c) TOTAL Independent Expenditures		1 1			Other (specify) ►	
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 Date	(a) SUBTOTAL of Itemized Independent Expenditures	s			60000.00	
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 Date	(b) SUBTOTAL of Unitemized Independent Expenditures					
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, , ,	(c) TOTAL Independent Expenditures			•		
[Electronically Filed] Date 01 28 2021	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					
Date 01 28 2021	Edwards, Paula	[Floatronia -II. T'	ladi	M = M		
		LE LECTIONICALLY FIL	Date Date	9 01	28 2021	

				FOR LINE 24 OF FORM 3X	
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
American Liberty Fund					
				C C00623421	
Check if 24-hour report 48-hour report	New repo	ort Amends rep	ort filed	on M M / D D / Y Y Y Y	
Full Name of Payee Ram Advertising LLC		☐ Memo	Item	Date of Public Distribution/Dissemination	
				10 / 05 / 2020	
Mailing Address 1000 Southern Blvd				Amount	
Suite 300					
City	State	Zip Code		40000.00	
West Palm Beach	FL	33405		Transaction ID : SE.5131 Date of Disbursement or Obligation	
Purpose of Expenditure Television Advertising		Category/ Type 00	4	10	
Name of Federal Candidate:		X Support	Office	e Sought: X House District: 21	
LOOMER, LAURA, , ,		Oppose		President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought	, , ,	72200.00	Disbu 2020	ursement For: Primary General Other (specify) ▶	
Full Name of Payee		☐ Memo	Item	Date of Public Distribution/Dissemination	
Ram Advertising LLC				M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1000 Southern Blvd				10 11 1252	
Suite 300				Amount	
City	State	Zip Code		100000.00	
West Palm Beach	FL	33405		Transaction ID : SE.5589 Date of Disbursement or Obligation	
Purpose of Expenditure Television Advertising		Category/	4	M M / D D / Y Y Y Y Y 1 1 2020	
- Joseph Autonomy		Type 004		10 13 2020	
Name of Federal Candidate:		x Support	Office	e Sought: House District: 21	
LOOMER, LAURA, , ,		Oppose		President Senate State: FL	
Calendar Year-To-Date		305059.00	Disbu 2020	ursement For: Primary K General	
Per Election for Office Sought	7 7		2020	Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures .			•	140000.00	
(b) SUBTOTAL of Unitemized Independent Expenditure	00				
(b) 300101AE of Officernized independent Experional	<i>-</i> 3		•		
(c) TOTAL Independent Expenditures					
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 File	ed1 -	M	M / D D / Y Y Y Y	
Signature		Dat	te 0	1 28 2021	

TEMIZED INDEPENDENT EXPENDITURES	5			PAGE 64 OF 64	
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X	
American Liberty Fund				FEC IDENTIFICATION NUMBER ▼	
,				C C00623421	
Check if 24-hour report 48-hour report	New rep	ort Amends repo	ort filed on	M M M / D D / Y Y Y Y	
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination	
Ram Advertising LLC				10 13 2020	
Mailing Address 1000 Southern Blvd			A ma	unt.	
Suite 300			Amo	unt	
City	State	Zip Code		60000.00	
West Palm Beach	FL	33405		of Disbursement or Obligation	
Purpose of Expenditure Television Advertising		Category/ Type 004		M M / D D / Y Y Y Y Y 13 2020	
Name of Federal Candidate:		✗ Support	Office Soug	ght: X House District: 01	
SHEDD, TIFFANY, , ,		Oppose	Presid	Λ 7	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	112725.00	Disburseme	ent For: Primary X General Other (specify) ▶	
Full Name of Payee		Memo	<u> </u>	of Public Distribution/Dissemination	
, , , , , , , , , , , , , , , , , , , ,				M M / D D / Y Y Y Y	
Mailing Address					
Walling Address			Amo	unt	
City	State	Zip Code			
City	Otate	Zip Gode			
Purpose of Expenditure			Date	of Disbursement or Obligation	
ruipose oi Experialiture		Category/ Type		M M / D D / Y Y Y Y	
Name of Federal Candidate:		Support	Office Souc	ht: House District:	
		Oppose		, <u> </u>	
		орросо	Presid		
Calendar Year-To-Date Per Election for Office Sought			Disburseme		
				Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	s		· [60000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures					
(c) TOTAL Independent Expenditures			· [660961.00	
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, , ,	[Flastronia all. E:	lod1	M = M /	D D / Y Y Y Y Y Y	
Signature	[Electronically File	Date Date	e 01	28 2021	