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

Schedule E)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
American Liberty Fund		C C00623421
Check if 24-hour report 48-hour report New report	Amends report filed	on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
Centro, Inc.		10 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11 E. Madison St		
6th Floor		Amount
City State Zip Coo	le	40000.00
Chicago IL 60602		Transaction ID : SE.5647 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising Categ	pry/ ype 004	10 21 2020
Name of Federal Candidate	Support Office	Sought:
JENSEN, JESSE, , ,	Oppose	President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought 4250		sement For: Primary General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Centro, Inc.		10 21 2020
Mailing Address 11 E. Madison St		
6th Floor		Amount
City State Zip Cod	de	40000.00
Chicago IL 60602		Transaction ID : SE.5650 Date of Disbursement or Obligation
Purpose of Expenditure Digital Advertising Categ	pry/ ype 004	10 / 21 / Y Y Y Y Y Y
	Support Office	Sought: House District: 05
GOOD, ROBERT G., , ,	Oppose	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought 4000		rsement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·····	80000.00
		7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(a) TOTAL lader and eath Funcarditures		
(c) TOTAL Independent Expenditures	•	
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized commit party committee) any political party committee or its agent.		•
Edwards, Paula, , , [Electronically Fil	ed] Date 10	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
American Liberty Fund	C C00623421			
Check if 24-hour report 48-hour report New report A	Amends report filed on			
Full Name of Payee	Date of Public Distribution/Dissemination			
Media Bridge LLC	10 21 7 2020			
Mailing Address 200 Lake Front Drive, #200	Amount			
City State Zip Code	e 2500.00			
Mineral VA 23117	Transaction ID : SE.5646 Date of Disbursement or Obligation			
Purpose of Expenditure Video Production Category Type				
Name of Federal Candidate	Support Office Sought: House District: 08			
JENSEN, JESSE, , ,	Oppose President Senate State: WA			
Calendar Year-To-Date Per Election for Office Sought 2500.0	Disbursement For: Primary Queen General Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
Media Bridge LLC	10 21 2020			
Mailing Address 200 Lake Front Drive, #200	Amount			
City State Zip Code	e 8000.00			
Mineral VA 23117	Transaction ID : SE.5648 Date of Disbursement or Obligation			
Purpose of Expenditure Digital Advertising Category Type				
Name of Federal Candidate	Support Office Sought: X House District: 08			
JENSEN, JESSE, , ,	Oppose President Senate State: WA			
Calendar Year-To-Date Per Election for Office Sought 50500.0	Disbursement For: Primary General Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	10500.00			
(a) SOBTOTAL OF HOMEZON INDEPENDENT EXPENDITURES	10500.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures	······································			
Under penalty of perjury I certify that the independent expenditures reported herein were not 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] Signature	dl Date 10 21 2020			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 3 OF 4 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
American Liberty Fund	C C00623421			
Check if 24-hour report 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y			
Full Name of Payee Media Bridge LLC	Date of Public Distribution/Dissemination			
Mailing Address 200 Lake Front Drive, #200	10 21 2020 Amount			
Other The Order				
City State Zip Code Mineral VA 23117	8000.00 Transaction ID : SE.5651 Date of Disbursement or Obligation			
Purpose of Expenditure Digital Advertising Category/ Type 004	10 / 21 / 2020			
Name of Federal Candidate X Support Office	Sought: X House District: 05			
GOOD, ROBERT G., , ,	President Senate State: VA			
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	rsement For: Primary General Other (specify)			
Full Name of Payee Media Bridge LLC	Date of Public Distribution/Dissemination			
Malling Address	10 21 / 2020			
Mailing Address 200 Lake Front Drive, #200	Amount			
City State Zip Code	2500.00			
25111	Transaction ID : SE.5652 Date of Disbursement or Obligation			
Purpose of Expenditure Video Production Category/ Type 004	10 / 21 / Y Y Y Y			
Name of Federal Candidate Support Office	e Sought: 🗶 House District:05			
GOOD, ROBERT G., , ,	President Senate State: VA			
Calendar Year-To-Date Per Election for Office Sought Disbut 2020	orsement For: Primary ★ General Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	10500.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the independent expenditures reported herein were not 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 Signature	0 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			

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

Schedule E)	i Livoironeo	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
American Liberty Fund		
		C C00623421
Check if 24-hour report 48-hour report	New report Amends report file	ed on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
New Journey PAC		10 21 2020
Mailing Address 7750 Okeechobee Blvd		1
Ste 4-366		Amount
City State		5000.00
West Palm Beach FL	33411	Transaction ID : SE.5649 Date of Disbursement or Obligation
Purpose of Expenditure Door Knocking	Category/ Type 004	10 21 2020
Name of Federal Candidate	✗ Support Office	ce Sought: House District: 21
LOOMER, LAURA, , ,	Oppose	President Senate State: FL
Calendar Year-To-Date		pursement For: Primary X General
Per Election for Office Sought	439957.00 202	0 Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
		M M / D D / Y Y Y Y
Mailing Address		
		Amount
City State	Zip Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Offi	ce Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date	Dis	bursement For: Primary General
Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	·····	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures		
(b) SUBTUTAL OF OFFICE HILDER HILDER EXPERIMENTS	•	7 7 7
(c) TOTAL Independent Expenditures	·	106000.00
Under penalty of perjury I certify that the independent exp with, or at the request or suggestion of, any candidate or a party committee) any political party committee or its agent.		
	[Electronically Filed] Date	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	_	