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## **FEC** FORM 3X

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

	For Other Than An Authori	zed Committee	Office Use Only
NAME OF COMMITTEE (in full)		Example: If typing, type over the lines.	12FE4M5
American Liberty Fund	<b>.</b>		
ADDRESS (number and street)	8111 S. US Highway 75		
▼	Suite 200		
Check if different than previously reported. (ACC)	Sherman		TX 75091 -
2. FEC IDENTIFICATION NU	UMBER ▼ CITY ▲		STATE ▲ ZIP CODE ▲
C C00623421	3. IS TH REPC		AMENDED (A)
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb 20 ( Report Due On:		Year Only)
(a) Quarterly Reports:	Mar 20 (	M3) Jun 20 (M6)	(Non-Election Year Only)
April 15 Quarterly Report (0	Apr 20 (I	M4) Jul 20 (M7)	Oct 20 (M10) Jan 31 (YE)
July 15	(c) 12-Day	Primary (12P)	General (12G) Runoff (12R)
Quarterly Report (C	Report for the:	Convention (12C)	Special (12S)
Quarterly Report (C	Floation on	M = M / D = D /	in the State of
Year-End Report (Y July 31 Mid-Year Report (Non-electio Year Only) (MY)	(d) 30-Day	General (30G)	Runoff (30R) Special (30S)
Termination Report	Report for the:		
(TER)	Election on	11 03	in the State of
5. Covering Period 10		through 11	23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
I certify that I have examined th	nis Report and to the best of my Edwards, Paula, , ,	knowledge and belief it is tr	rue, correct and complete.
Type or Print Name of Treasure			
Signature of Treasurer	ards, Paula, , ,	[Electronically Filed]	Date 01 / 28 / 2021
NOTE: Submission of false, erron	eous, or incomplete information ma	y subject the person signing	this Report to the 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 15 2020 11 23 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 150575.12 Beginning of Reporting Period..... 644694.55 1643887.89 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 1643854.80 795269.67 6(a) and 6(c) for Column B)..... 675103.70 1523688.83 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 120165.97 120165.97 (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 0.00 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 10 15 2020 11 23 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 634362.92 1628123.65 (i) Itemized (use Schedule A)..... 10131.63 15531.15 (ii) Unitemized ..... (iii) TOTAL (add 644494.55 1643654.80 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 1643654.80 644494.55 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.) 200.00 233.09 (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))....... 644694.55 1643887.89

644694.55

1643887.89

### **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)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating	42418.70	78820.30
Expenditures(c) Total Operating Expenditures	42410.70	70020.30
(add 21(a)(i), (a)(ii), and (b))	42418.70	78820.30
Transfers to Affiliated/Other Party Committees Contributions to	0.00	0.00
Federal Candidates/Committees and Other Political Committees	0.00	0.00
Independent Expenditures	623695.00	1444060 55
(use Schedule E)	632685.00	1444868.53
(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	200	0.00
(c) Other Political Committees	0.00	0.00
(such as PACs)(d) Total Contribution Refunds	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. § 30101(2) (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
(c) Total Federal Election Activity (add 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))	675103.70	1523688.83
Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
from Line 31)	675103.70	1523688.83

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
3. Total Contributions (other than loans) (from Line 11(d), page 3)	644494.55	1643654.80
4. Total Contribution Refunds (from Line 28(d))	0.00	0.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	644494.55	1643654.80
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶	42418.70	78820.30
7. Offsets to Operating Expenditures (from Line 15, page 3)	200.00	233.09
8. Net Operating Expenditures (subtract Line 37 from Line 36)	42218.70	78587.21

FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

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for each category of the 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 allen, helen lynn, , , Date of Receipt Mailing Address 8810 Lacrosse Dr 2020 15 City Zip Code State Transaction ID: SA11AI.6042 TX 75231 **Dallas** Amount of Each Receipt this Period FEC ID number of contributing C 1562.81 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) retired retired Contibution Receipt For: Aggregate Year-to-Date ▼ Primary General 1562.81 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** allen, helen lynn, , , Date of Receipt Mailing Address 8810 Lacrosse Dr 10 2020 City State Zip Code Transaction ID: SA11AI.6041 TX **Dallas** 75231 Amount of Each Receipt this Period FEC ID number of contributing 250.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) retired Contibution retired Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 1812.81 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Amoroso, John, , , Date of Receipt Mailing Address 1 Lyman St 10 16 2020 City Zip Code State Transaction ID: SA11AI.6596 MA Westborough 01581 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) Contibution retired retired Receipt For: Aggregate Year-to-Date ▼ Primary General 250.00 Other (specify) 2062.81 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 7 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c

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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 Batmasian, James, , , Date of Receipt Mailing Address 40 SE 5th St Suite 610 2020 City Zip Code State Transaction ID: SA11AI.6637 FL Boca Raton 33432 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) Retired Retired Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bobrow, Norman, , , Date of Receipt Mailing Address 18106 Tudor Road 10 2020 City State Zip Code Transaction ID: SA11AI.6630 NY Jamica 11432 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) Norman Bobrow and Co Real Esta Contribution President Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 50000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Clayton, John, , , Date of Receipt Mailing Address 1118 Bay Sky Way 10 15 2020 City Zip Code State Transaction ID: SA11AI.6136 TX Seabrook 77586 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) Contibution Program Analyst NASA Receipt For: Aggregate Year-to-Date ▼ Primary General 260.73 Other (specify) 55260.73 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: **PAGE** 8 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 12 Detailed Summary Page

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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 failing, bruce, , , Date of Receipt Mailing Address 221 el bravo way 2020 City Zip Code State Transaction ID: SA11AI.6197 FL Palm Beach 33480 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 Contibution 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.** Gray, Donald, , , Date of Receipt Mailing Address 23233 n Pima rd 10 15 2020 City State Zip Code Transaction ID: SA11AI.6234 ΑZ Scottsdale 85255 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) **Gray Associates** Contibution Owner Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 1000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Investments Limited Date of Receipt Mailing Address 215 North Federal Highway 10 19 2020 City State Zip Code Transaction ID: SA11AI.6642 FL Boca Raton 33432 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 Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 6260.73 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

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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 Kovanda, Christine, , , Date of Receipt Mailing Address 847 Maxfield Road 2020 City Zip Code State Transaction ID: SA11AI.6338 MI Hartland 48353 Amount of Each Receipt this Period FEC ID number of contributing C 208.65 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) retired retired Contibution Receipt For: Aggregate Year-to-Date ▼ Primary General 208.65 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Lindemann, Frayda, , Dr., Date of Receipt Mailing Address 15 West Star Island Drive 10 2020 City State Zip Code Transaction ID: SA11AI.6626 Miami Beach FL 33139 Amount of Each Receipt this Period FEC ID number of contributing 10000.00 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) ▼ 10000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **C.** Martin, Jim, , , Date of Receipt Mailing Address 1695 Meadow Beach Lane 16 2020 City Zip Code State Transaction ID: SA11AI.6623 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) Contribution Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 300000.00 Other (specify) 110208.65 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 10 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 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.6633 NY Mattituck 11952 Amount of Each Receipt this Period FEC ID number of contributing 75000.00 federal political committee. Name of Employer (for Individual) Memo Item Occupation (for Individual) Retired Retired Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 375000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Mclaws, Kevin, , , Date of Receipt Mailing Address 2923 crestview 10 2020 City State Zip Code Transaction ID: SA11AI.6409 UT Hurricane 84737 Amount of Each Receipt this Period FEC ID number of contributing 320.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Contibution Hotel Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 320.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Moskowitz, Michael, , , Date of Receipt Mailing Address 310 Lexington Avenue PHB 16 2020 City Zip Code State Transaction ID: SA11AI.6624 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) Contribution Self Employed Finance Receipt For: Aggregate Year-to-Date ▼ Primary General 125000.00 Other (specify) 125320.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 11 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c 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 Moskowitz, Michael, , , Date of Receipt Mailing Address 310 Lexington Avenue PHB 2020 City Zip Code State Transaction ID: SA11AI.6632 NY New York 10016 Amount of Each Receipt this Period FEC ID number of contributing C 50000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Finance Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 175000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Pia, Christopher, , , Date of Receipt Mailing Address 85 Perry St 10 2020 City State Zip Code Transaction ID: SA11AI.6628 NY New York 10014 Amount of Each Receipt this Period FEC ID number of contributing 25000.00 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) ▼ 25000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Smith, Harold, , , Date of Receipt Mailing Address 200 West Madison 26 2020 City State Zip Code Transaction ID: SA11AI.6634 IL Chicago 60606 Amount of Each Receipt this Period FEC ID number of contributing C 25000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Contribution Retired Retired Receipt For: Aggregate Year-to-Date ▼ Primary General 25000.00 Other (specify) 100000.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 12 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 12 11c 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 Thurman, Matt, , , Date of Receipt Mailing Address 10350 Lehman Rd 2020 15 City Zip Code State Transaction ID: SA11AI.6560 FL Orlando 32825 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 Contibution 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.** Topper, Lewis, , , Date of Receipt Mailing Address 212 Treasure Place 10 15 2020 City State Zip Code Transaction ID: SA11AI.6622 FL Jupiter 33469 Amount of Each Receipt this Period FEC ID number of contributing 100000.00 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) ▼ 600000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **c.** Topper, Lewis, , , Date of Receipt Mailing Address 212 Treasure Place 19 2020 City State Zip Code Transaction ID: SA11AI.6625 FL Jupiter 33469 Amount of Each Receipt this Period FEC ID number of contributing C 50000.00 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 650000.00 Other (specify) 150250.00 SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

FOR LINE NUMBER: PAGE 13 OF Use separate schedule(s) (check only one) for each category of the **X** 11a 11b 11c 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 Topper, Lewis, , , Date of Receipt Mailing Address 212 Treasure Place 2020 City Zip Code State Transaction ID: SA11AI.6636 FL Jupiter 33469 Amount of Each Receipt this Period FEC ID number of contributing C 75000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Self Employed Executive Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 725000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Wheat, Lynne, , , Date of Receipt Mailing Address 1255 south ocean blvd 10 2020 City State Zip Code Transaction ID: SA11AI.6573 FL Palm Beach 33480 Amount of Each Receipt this Period FEC ID number of contributing 5000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) retired retired Contibution Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) ▼ 5000.00 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name c. Wister, Diana, , , Date of Receipt Mailing Address 335 El Vedado 10 26 2020 City Zip Code State Transaction ID: SA11AI.6581 FL Palm Beach 33480 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) Contibution retired retired Receipt For: Aggregate Year-to-Date ▼ Primary General 5000.00 Other (specify) 85000.00 SUBTOTAL of Receipts This Page (optional)..... 634362.92 TOTAL This Period (last page this line number only).....

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SCHEDULE B (FEC Form 3X)	Has concrete achadula(s) FOR LINE NUMBER:								PAGE	14 C	F 39
ITEMIZED DISBURSEMENTS		rate schedule(s) category of the	(check				, -	¬ ~.		٦ ٥٦	
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NAME OF COMMITTEE (In Full)											
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A. Branch Banking and Trust Compan	У				M M		D D			Y	V
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Winston Salem	NC	27101			FEC Ide	entifica	tion	Numl	oer	_	
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Candidate Name									321B.		
Sandidate Name			Category Type	/	Amount	of Ea	ich D	ısbur	semer	nt this F	'eriod
Office Sought: House Disbursem	ent For:		.,,,,							20.0	0
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SUBTOTAL of Disbursements This Page (optional)				_	<b>+</b>		÷	+		37.10	
TOTAL This Period (last page this line number only).				•							

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SCHEDULE B (FEC Form 3X)			FOR LII	PAGE 15 OF								
ITEMIZED DISBURSEMENTS		arate schedule(s) category of the	l `	only one)	, <sub>_</sub>	¬ 00		oc	□ 07			
		Summary Page		1b 2 8a 2	2 3b	23 28c		26 29	27 30b			
Any information copied from such Reports and State	ments may r	not he sold or use								ne		
or for commercial purposes, other than using the na												
NAME OF COMMITTEE (In Full)												
American Liberty Fund												
Full Name (Last, First, Middle Initial)												
A. Branch Banking and Trust Compa	ny			Dat	e of L	oisburse /		Υ	Y Y Y	7		
Mailing Address 200 W 2nd St					10	2	3		2020			
City Winston Salem	State NC	Zip Code 27101		FEG	Iden	tificatio	n Num	nber				
Purpose of Disbursement Bank Srvice Fees				С								
Candidate Name			Category/ Type	Am		saction of Each	_		nt this Pe	riod		
	ement For:	Canaral	Турс			7			1.00			
Senate President	Other (spec	☐ General cify) ▼		Ιп	Memo	o Item						
State: District:												
Full Name (Last, First, Middle Initial)  B. Branch Banking and Trust Compa	ıny			Dat	e of D	isburse	ment					
Mailing Address 200 W 2nd St				М	10		6 /		2020			
City	State	Zip Code										
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Full Name (Last, First, Middle Initial)												
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Purpose of Disbursement Bank Srvice Fees												
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٩.	Branch Banking and Trust Compar	anch Banking and Trust Company								
	Mailing Address 200 W 2nd St					10 30 2020				
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	Winston Salem	NC	27101			FEC Identification Number				
	Purpose of Disbursement				_	C				
	Bank Srvice Fees			l .		Transaction ID : SB21B.6668				
	Candidate Name			Catego		Amount of Each Disbursement this Period				
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	Candidate Name				الب	Transaction ID : SB21B.6669				
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	Winston Salem	NC	27101							
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	Candidate Name					Transaction ID : SB21B.6673				
	Candidate Name			Catego		Amount of Each Disbursement this Period				
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American Liberty Fund											
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Full Name (Last, First, Middle Initial)  A. Branch Banking and Trust Compan	W				Date of	Dishu	rsem	ent			
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Winston Salem Purpose of Disbursement	NC	27101								-	
Bank Srvice Fees			· · · ·	7	C						
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	Primary	General									
President State: District:	Other (spec	ыу <i>)</i>			Mei	mo Ite	m				
Full Name (Last, First, Middle Initial)											
C. Branch Banking and Trust Compan	V				Date of	Disbu	rsem	ent			
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Mailing Address 200 W 2nd St					11	I L	23	1 [	_2	020	
City	state	Zip Code		+	FF0 ::		Ale •	NI '			
Winston Salem	NC	27101			FEC Ide	entifica	tion I	Numbe	er	_	
Purpose of Disbursement Bank Srvice Fees					C				_		
Candidate Name				_   _				) : SB2			
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Office Sought: House Disburser	nent For:		.,,,,	$\dashv$						693.0	0
Senate	Primary	General				-		-		- 4	
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NAME OF COMMITTEE (In Full)											
American Liberty Fund											
Full Name (Last, First, Middle Initial)				D . (5	· ·						
A. Cooper, Brittany, , ,					Disburseme						
Mailing Address 3114 Red Barn Loop				10 15 2020							
City	State	Zip Code		FFC Iden	tification N	lumher					
Sherman	TX	75901			itillocation 1						
Purpose of Disbursement Project Management				C							
Candidate Name			0-1/			: SB21B.6647					
			Category/ Type	Amount	or Each Dis	sbursement this Period					
Office Sought: House Disburse	ment For:	1		1   [ ]		5000.00					
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Mailing Address 3114 Red Barn Loop				11	02	2020					
•	State	Zip Code		FEC Ider	tification N	lumber					
Sherman Purpose of Disbursement	TX	75901									
Project Management			001	C							
Candidate Name			Category/			: SB21B.6645 sbursement this Period					
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	ment For:			T L	7	5000.00					
Senate	Primary	General									
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<u> </u>				M M	/ D D	/					
Mailing Address 3208 E Colonial Drive				10	19	2020					
City	State	Zip Code		FEO 13	Aldia ali N	li i and ha a ii					
Orlando	FL	32803		FEC Ider	tification N	lumber					
Purpose of Disbursement Fundraising			1								
Candidate Name			001			: SB21B.6648					
Candidate Name			Category/ Type	Amount o	of Each Dis	sbursement this Period					
Office Sought: House Disburse	ment For:		1,700	1		2326.05					
Senate	Primary	General			7	4					
President	Other (spe	ecify) 🔻		Mem	o Item						
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			Summary Page	×	21b 28a	22 28b	27 30b						
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	pied from such Reports and Stat ourposes, other than using the na												
NAME OF COM	IMITTEE (In Full)												
American L	iberty Fund												
_ `	, First, Middle Initial)					D-4-	: D:-I						
A. Hilton Wes	t Palm Beach					Date of	Disburse		YYY				
Mailing Address	600 Okeechobee Blvd					11		6	2020				
City West Palm Bead	.h	State FL	Zip Code 33401			FEC Id	entificatio	n Number					
Purpose of Disb		ΓL	33401										
Staff Travel	arounding					C							
Candidate Name	<del></del>			Category	v/			ID: SB21 Disbursen	B.6672 nent this Period				
				Type	y'	7 tillouri	or Edon	Diobarden	nont trio i onod				
Office Sought:		ement For:							1027.29				
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B. Keith Ablov						Date of	Disburse	ement					
						M M	/ D	D / Y	YYY				
Mailing Address	36 Water Street					10	2	26	2020				
City		State	Zip Code			FEC Id	entificatio	n Number					
Newburyport  Purpose of Disb	ursement	MA	01950										
Political Consul				001	71	C		15 2521	7 2221				
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C. Liberty Stra	ategies					Date of	Disburse		YYY				
Mailing Address	2120 Powers Ferry Road Suite 125					10		7	2020				
City		State	Zip Code			FEC Id	entificatio	n Number					
Atlanta Purpose of Disb	uraamant	GA	30339										
Travel Reimbur						C	nsaction	ID : SB21	B.6653				
Candidate Name	9			Category Type	y/	Amoun	t of Each	Disbursen	nent this Period				
Office Sought:	House Disburs	ement For:		1900	-				496.20				
· ·	Senate	Primary	General				7						
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ackslash	NAME OF COMMITTEE (In Full)										
$  \rangle$	American Liberty Fund										
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Δ	Full Name (Last, First, Middle Initial)					Date of	Disburse	ment			
Λ.	Media Bridge LLC					M M	/ D		V	YYYY	
	Mailing Address 200 Lake Front Drive, #200					10	1!			2020	
	City	State	Zip Code			EEC Ido	ntification	a Num	hor		
	Mineral	VA	23117			rec ide	Tillication	1 Nulli	pei		
	Purpose of Disbursement Data Append Services					C					
	Candidate Name				_		nsaction				
	Candidate Name			Category Type	′/	Amount	of Each	Disbu	rseme	nt this Pe	eriod
	Office Sought: House Disburser	ment For:		.,,,,	$\dashv$					5383.97	
	Senate	Primary	General				7		,		
	President	Other (spec	cify) ▼			Men	no Item				
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В.	Full Name (Last, First, Middle Initial)	Б				Data of	Disburse	mont			
υ.	Paula Y. Edwarrds, CPA, MST, LL	.P				Date of			V	Y	
	Mailing Address 1629 K Street NW Suite 300					10	2			2020	
		State	Zip Code			EEC Ido	ntification	a Nium	hor		
	Washington	DC	20006			_	riuncation	1 Num	bei		
	Purpose of Disbursement Accounting/Compliance Services				7	C					
	Candidate Name				_		saction	_			
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	Suite 300 City	State	Zip Code								
	Washington	DC	20006			FEC Ide	ntification	n Num	ber		
	Purpose of Disbursement				$\neg$	C					
	Accounting/Compliance Services						nsaction	ID : S	B21B	.6656	
	Candidate Name			Category	//	Amount	of Each	Disbu	rseme	nt this Pe	eriod
	Office Sought: House Disburser	ment For:		Type	_	· · ·				6200.00	)
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	President	Other (spec	cify) 🔻			Mon	no Item				
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Г									-	45700.00	
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SCHEDULE B (FEC Form 3X)	Use separa	ate schedule(s)	FOR LINE I	NE NUMBER: PAGE 21 OF 3							
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NAME OF COMMITTEE (In Full) American Liberty Fund	333.0	any pomou									
Full Name (Last, First, Middle Initial)  A. Paula Y. Edwarrds, CPA, MST, LL	Р			Date of Disbursement							
Mailing Address 1629 K Street NW Suite 300				11 09 2020							
Washington	State DC	Zip Code 20006		FEC Identification Number							
Purpose of Disbursement Accounting/Compliance Services Candidate Name			Catagony	Transaction ID : SB21B.6685  Amount of Each Disbursement this Period							
Office Sought: House Disburser Senate	ment For:	General	Category/ Type	850.00							
State: District:	Other (specif			Memo Item							
Full Name (Last, First, Middle Initial)  B. Revv Fundraising Platform				Date of Disbursement							
Mailing Address 1101 K Street Floor 8				10 23 2020							
Washington Purpose of Disbursement	State DC	Zip Code 20005		FEC Identification Number							
Merchant Fees Candidate Name			Category/ Type	Transaction ID : SB21B.6679 Amount of Each Disbursement this Period							
Office Sought: House Disburser Senate President	nent For: Primary Other (specif	General (v)	.,,,,,	1063.57							
State: District:				Memo Item							
Full Name (Last, First, Middle Initial)  C. SimpleTexting				Date of Disbursement							
Mailing Address 1815 Purdy Avenue				10 19 2020							
City Miami Purpose of Disbursement Texting Service	State FL	Zip Code 33139		FEC Identification Number							
Candidate Name			Category/ Type	Transaction ID: SB21B.6657  Amount of Each Disbursement this Period							
Office Sought:  House Senate President State: District:	ment For: Primary Other (specif	General y) ▼	21:5	2500.00 Memo Item							
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American Liberty Fund												
Full Name (Last, First, Middle Initial)					<b>.</b>	, D						
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Mailing Address 1815 Purdy Avenue	I				10		19	<u></u>	2020			
City Miami	State FL	Zip Code 33139			FEC Id	entificati	on Num	ber				
Purpose of Disbursement	'	33139						-	-			
Texting Service					C							
Candidate Name			Categoi	24/		ansactio			<b>.6676</b> nt this Pe	erind		
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Office Sought: House Disburs	ement For:	'			ΙΙ.	1 70			886.94			
Senate	Primary	General				,		,				
State: District:	Other (sp	ecify) ▼			Me	mo Item	ı					
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B. SMA Communications					Date o	f Disburs	sement					
- SIMA Communications					M M		<b>D</b> /	Y	Y Y Y	Y		
Mailing Address 6853 SW 18th Street Suite M-200					10	J. L	20		2020	_		
City	State	Zip Code			FEC Id	entificati	on Num	ber				
Boca Raton Purpose of Disbursement	FL	33433					_	-	-			
Fundraiising Services					С							
Candidate Name			Categor	24/		nsactio			<b>6659</b> nt this Pe	oriod		
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Office Sought: House Disburs	ement For:				ΙΙ.				2000.00	)		
Senate	Primary	General				,		,				
President State: District:	Other (sp	ecify)			Me	mo Item	l					
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Full Name (Last, First, Middle Initial)  C. SMA Communications					Date o	f Disbur	sement					
Mailing Address 6853 SW 18th Street Suite M-200					10	/ D	20		2020			
City	State	Zip Code				tif! **	NI:					
Boca Raton	FL	33433			FEC IO	entificati	on Num	iber	_			
Purpose of Disbursement Fundraising Services				$\neg$	C	ansactio	n ID · S	R21R	6660			
Candidate Name			Categor Type	ry/					nt this Pe	eriod		
Office Sought: House Disburs	ement For:		71: -						3500.00	)		
Senate	Primary	General						,				
President	Other (sp	ecify) ▼			Ме	mo Item	ı					
State: District:												
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l e				•					6386.94	4		

# SCHEDULE D (FEC Form 3X) DEBTS AND OBLIGATIONS

**Excluding Loans** 

(Use separate schedule(s) for each numbered line) PAGE 23 OF
FOR LINE NUMBER:
(check only one)

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X	10

39

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

TEMIZED INDEPENDENT EXPENDITURES	i		PAGE 24 OF 39 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
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			Amount
6th Floor City	State	Zip Code	40000.00
Chicago	IL	60602	Transaction ID : SE.5636 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:		<b>✗</b> Support	Office Sought:  House District: 08
JENSEN, JESSE, , ,		Oppose	President Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	7	42500.00	Disbursement For: ☐ Primary
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Centro, Inc.			10 22 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 11 E. Madison St			Amount
6th Floor	Ctoto	Zin Codo	40000.00
City Chicago	State	Zip Code 60602	Transaction ID : SE.5992 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:		<b>x</b> Support	Office Sought: House District:
TRUMP, DONALD J., , ,		Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	7	40000.00	Disbursement For: ☐ Primary
(a) SUBTOTAL of Itemized Independent Expenditure:  (b) SUBTOTAL of Unitemized Independent Expenditure.			
(c) TOTAL Independent Expenditures			<b>•</b>
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 Fil	[ed] Date	9 01 28 2021
Signature			

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 25 OF 39
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 Y
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Centro, Inc.			[	10 22 7 2020 The state of the s
Mailing Address 11 E. Madison St			Amou	int
6th Floor			741100	
City	State	Zip Code	<u> </u>	80000.00
Chicago	IL	60602		saction ID : SE.5995 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 22 / Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office Sough	ht: House District:
TRUMP, DONALD J., , ,		Oppose	<b>✗</b> Presid	
Calendar Year-To-Date			Disburseme	nt For: Primary X General
Per Election for Office Sought	7	120000.00	2020	Other (specify)
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Delivery Signs			П	10 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 40 W. Cristal Lake				10 26 2020
40 W. Crystal Lake			Amou	ınt
City	State	Zip Code	ΗГ.	14963.00
Orlando	FL	32806	Tran	saction ID : SE.6015 of Disbursement or Obligation
Purpose of Expenditure		Category/		M M / D D / Y Y Y
Sign Printing		Type 004		10 26 2020
Name of Federal Candidate:		<b>x</b> Support	Office Sough	
LOOMER, LAURA, , ,		Oppose	Presid	lent Senate State: FL
Calendar Year-To-Date		462523.00	Disburseme	nt For: Primary 🗶 General
Per Election for Office Sought	7 7	402323.00	2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditure				94963.00
(c) TOTAL Independent Expenditures			<b>•</b>	
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, , ,	Electronicalla El	adl	M = M /	DDD / YTYTY
Signature	Electronically Fil	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 26 OF 39
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		
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
Facebook				10 15 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			Amou	ınt
City	State	Zip Code	— I I I	26643.00
Menlo Park	CA	94025		saction ID : SE.5607 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Soug	ht: X House District: 01
SHEDD, TIFFANY, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	<u> </u>	145368.00	Disbursement 2020	nt For:
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Facebook			_ I	10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way				
			Amou	ınt
City	State	Zip Code		15000.00
Menlo Park	CA	94025		saction ID : SE.5999 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 / 22 / 2020
Name of Federal Candidate:		<b>x</b> Support	Office Soug	ht: House District:
TRUMP, DONALD J., , ,		Oppose	<b>X</b> Presid	lent Senate State:
Calendar Year-To-Date Per Election for Office Sought		161500.00	Disbursemer	,
Tot Election to Since Godgitt	7			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			· [	41643.00
(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, , ,	Flootronically E	odl	M = M /	DID / YIYIYI
Signature	Electronically Fil	eaj Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 27 OF 39 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 Facebook		☐ Memo	Item Date	of Public Distribution/Dissemination
Mailing Address 1 Hacker Way			Amo	10 23 2020 unt
City	State	Zip Code		25000.00
Menlo Park	CA	94025		saction ID : SE.6009 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 23 / 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	ght: House District:
TRUMP, DONALD J., , ,		Oppose	<b>X</b> Presi	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought		189500.00	Disburseme	, .
,				Other (specify)
Full Name of Payee Facebook		∐ Memo	Item Date	of Public Distribution/Dissemination
Moiling Address				10 27 2020
Mailing Address 1 Hacker Way			Amo	unt
City	State	Zip Code		25000.00
Menlo Park	CA	94025		nsaction ID : SE.6020 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		M 10 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht: House District:
TRUMP, DONALD J., , ,		Oppose	<b>X</b> Presi	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought		219500.00	Disburseme	, ,
				Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· [	50000.00
(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	ed1 -	M = M /	D D / Y Y Y Y Y
Signature		Date	9 01	28 2021

TEMIZED INDEFERDENT EXTENDITORES				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
Full Name of Payee Facebook		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Malling Address				10 27 2020
Mailing Address 1 Hacker Way			Ar	nount
City	State	Zip Code		4000.00
Menlo Park	CA	94025		ransaction ID : SE.6022 ate of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 27 7 2020
Name of Federal Candidate:		<b>X</b> Support	Office Sc	ought: 🗶 House District: 21
LOOMER, LAURA, , ,		Oppose	Pre	esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 7	491523.00	Disburse 2020	ment For:
Full Name of Payee		Memo	Item Da	ate of Public Distribution/Dissemination
Media Bridge LLC				10 15 / 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	— Г	2500.00
Mineral	VA	23117	I .	ransaction ID : SE.5606 ate of Disbursement or Obligation
Purpose of Expenditure Video Production		Category/ Type 004		10 / D D / Y Y Y Y Y Y Y 10 16 16 16 16 16 16 16 16 16 16 16 16 16
Name of Federal Candidate:		<b>x</b> Support	Office Sc	ought:   House District: 02
CRAFTS, DALE, , ,		Oppose	Pre	esident Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7	54473.00	Disburse 2020	ment For:
				Grief (Specify) -
(a) SUBTOTAL of Itemized Independent Expenditures				6500.00
			F	
(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	ed]	e 01	28 2021
Signature	<u> </u>	Date	5 01	20 2021

TEMIZED INDEPENDENT EXPENDITURES	•			PAGE 29 OF 39
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
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Media Bridgé LLC				10 15 7 2020
Mailing Address 200 Lake Front Drive, #200			Amou	nt
City	State	Zip Code		5329.00
Mineral	VA	23117		saction ID : SE.5608 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 16 2020
Name of Federal Candidate:		<b>✗</b> Support	Office Sough	nt: X House District: 01
SHEDD, TIFFANY, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought	7	150697.00	Disbursemer 2020	nt For:  Primary
Full Name of Payee		Memo		of Public Distribution/Dissemination
Media Bridge LLC				M = M / D = D / Y = Y = Y
Mailing Address			— L	10 19 2020
200 Lake Front Drive, #200			Amou	nt
City	State	Zip Code	-	10000.00
Mineral	VA	23117		saction ID : SE.5616 of Disbursement or Obligation
Purpose of Expenditure Radio Advertising		Category/ Type 004		10 19 2020
Name of Federal Candidate:		<b>x</b> Support	Office Sough	nt: Nouse District: 21
LOOMER, LAURA, , ,		Oppose	Presid	ent Senate State: FL
Calendar Year-To-Date		425060.00	Disbursemer	nt For: Primary 🗶 General
Per Election for Office Sought	7 7	12000.00	<sup>2020</sup>	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	S		· [	15329.00
(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 Fil	odl	M = M /	D D / Y Y Y Y Y
Signature	<sub>[</sub> -гисы описану F н	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 30 OF 39 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				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	- W / D - D / Y - Y - Y - Y
Full Name of Payee Media Bridge LLC		☐ Memo		of Public Distribution/Dissemination
Mailing Address				10 19 2020
200 Lake Front Drive, #200			Amou	nt
City	State	Zip Code		6000.00
Mineral	VA	23117		action ID : SE.5617 of Disbursement or Obligation
Purpose of Expenditure Radio Advertising		Category/ Type 004		10 19 / 2020
Name of Federal Candidate:		<b>X</b> Support	Office Sough	it: X House District: 07
KLACIK, KIMBERLY, , ,		Oppose	Preside	ent Senate State: MD
Calendar Year-To-Date Per Election for Office Sought		66000.00	Disbursemen	t For: Primary Seneral
Ter Election for Office Sought	7		c	ther (specify) ►
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Media Bridge LLC				10 19 / 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	<u> </u>	4000.00
Mineral	VA	23117		saction ID : SE.5619 of Disbursement or Obligation
Purpose of Expenditure		Category/	Date	M / D D / Y Y Y Y
Radio Advertising		Type 004	IJ   L	10 19 2020
Name of Federal Candidate:		<b>x</b> Support	Office Sough	it: 🗶 House District: 01
SHEDD, TIFFANY, , ,		Oppose	Preside	ent Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		194697.00	Disbursemen	t For: Primary General
Fer Election for Office Sought	7 7		C	ther (specify) ▶
			_	
(a) SUBTOTAL of Itemized Independent Expenditures			<b>•</b>	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditur	·es			
`,				7
(c) TOTAL Independent Expenditures			<b>•</b>	
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	[ed]	M M /	28 2021
Signature		Date	9 01	2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 31 OF 39 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 / D D / Y Y Y Y
Full Name of Payee		Memo	Item Date o	f Public Distribution/Dissemination
Media Bridge LLC		_ Weine	М	10 19 2020
Mailing Address 200 Lake Front Drive, #200			Amoun	t
City	State	Zip Code	— Г	3000.00
Mineral	VA	23117	Transa Date o	action ID : SE.5621  f Disbursement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type 004	М	10 19 2020
Name of Federal Candidate:		<b>✗</b> Support	Office Sought	:: X House District: 02
CRAFTS, DALE, , ,		Oppose	Preside	nt Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	, , ,	87473.00	Disbursement 2020 Ot	For: Primary <b>X</b> General her (specify) ▶
Full Name of Payee		☐ Memo	Item Date o	f Public Distribution/Dissemination
Media Bridge LLC			М	10 21 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			Amoun	t
City	State	Zip Code	— r	2500.00
Mineral	VA	23117		action ID : SE.5633 f Disbursement or Obligation
Purpose of Expenditure Video Production		Category/ Type 004	M	
Name of Federal Candidate:		<b>x</b> Support	Office Sought	: X House District: 08
JENSEN, JESSE, , ,		Oppose	Preside	nt Senate State: WA
Calendar Year-To-Date Per Election for Office Sought	7 7	2500.00	Disbursement	For: Primary   General  her (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.			· [	5500.00
(b) SUBTOTAL of Unitemized Independent Expenditure	es		· [	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	te or authorized			
Edwards, Paula, , ,	Electronically Fil	ed]	M = M /	28 2021
Signature		Date	9 01	20 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 32 OF 39
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		M / D D / Y Y Y Y
Full Name of Payee		☐ Memo	Item Date of	f Public Distribution/Dissemination
Media Bridge LLC				10 21 / 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			Amour	
City	State	Zip Code	-	8000.00
Mineral	VA	23117		action ID : SE.5638  If Disbursement or Obligation
Purpose of Expenditure Digital Advertising	1	Category/ Type 004	М	10 21 2020
Name of Federal Candidate:		<b>✗</b> Support	Office Sough	t: X House District: 08
JENSEN, JESSE, , ,		Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	50500.00	Disbursement 2020 Ot	t For: Primary <b>X</b> General
Full Name of Payee		☐ Memo		of Public Distribution/Dissemination
Media Bridge LLC			М	10 22 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 200 Lake Front Drive, #200				
			Amour	it
City	State	Zip Code		8000.00
Mineral	VA	23117		action ID : SE.5996  f Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 22 / Y Y Y Y Y
Name of Federal Candidate:		<b>✗</b> Support	Office Sough	t:
TRUMP, DONALD J., , ,		Oppose	<b>X</b> Preside	ent Senate State:
Calendar Year-To-Date		128000.00	Disbursement	For: Primary General
Per Election for Office Sought	7 1 7		2020 Of	ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	i		<b>.</b>	16000.00
(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	edl –	M = M /	20 / 2021
Signature		Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 33 OF 39
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  EC 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 1	M / D D / Y Y Y Y
Mailing Address 200 Lake Front Drive, #200			Amount	
City	State	Zip Code		2500.00
Mineral	VA	23117		ction ID : SE.5997 Disbursement or Obligation
Purpose of Expenditure Video Production		Category/ Type 004	М	
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:	House District:
TRUMP, DONALD J., , ,		Oppose	<b>x</b> Presiden	t Senate State:
Calendar Year-To-Date Per Election for Office Sought	7 1 7	130500.00	Disbursement 2020 Oth	For: Primary   General  er (specify)
Full Name of Payee		☐ Memo	Item Date of	Public Distribution/Dissemination
Media Bridge LLC				0 22 / 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		16000.00
Mineral	VA	23117		ction ID : SE.5998 Disbursement or Obligation
Purpose of Expenditure Digital Advertising	1	Category/ Type 004	M	
Name of Federal Candidate:		<b>✗</b> Support	Office Sought:	House District:
TRUMP, DONALD J., , ,		Oppose	<b>X</b> Presiden	t Senate State:
Calendar Year-To-Date Per Election for Office Sought	1 1 1 1	146500.00	Disbursement 2020 Oth	For: Primary <b>✗</b> General er (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	· · · · · · · · · · · · · · · · · · ·		<b>→</b>	18500.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		<b>.</b>	7
(c) TOTAL Independent Expenditures			•	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	edl -		20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 34 OF 39 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
Full Name of Payee		☐ Memo	Itom Date	of Public Distribution/Dissemination
Media Bridge LLC		□ IVIEITIO	item Date	M M / D D / Y Y Y Y Y Y 10 10 22 2020
Mailing Address 200 Lake Front Drive, #200			Amo	unt
City	State	Zip Code	<u> —</u> г	3000.00
Mineral	VA	23117		nsaction ID : SE.6000 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		M 10 / 22 / Y Y Y Y Y Y 2020
Name of Federal Candidate:		<b>X</b> Support	Office Sou	ght: House District:
TRUMP, DONALD J., , ,		Oppose	<b>X</b> Presi	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought		164500.00	Disburseme	, .
,	7			Other (specify) ▶
Full Name of Payee  Media Bridge LLC		☐ Memo	Item Date	e of Public Distribution/Dissemination
Wiedla Bridge EEO				10 23 7 2020
Mailing Address 200 Lake Front Drive, #200			Amo	ount
City	State	Zip Code	-	5000.00
Mineral	VA	23117		nsaction ID : SE.6010 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		10 / 23 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>x</b> Support	Office Sou	ght: House District:
TRUMP, DONALD J., , ,		Oppose	<b>X</b> Presi	dent Senate State:
Calendar Year-To-Date Per Election for Office Sought		194500.00	Disburseme	, .
	1			Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures			· [	8000.00
(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	od1	M = M	/ D D / Y Y Y Y Y
Signature	ъссионисану Ги	Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 35 OF 39
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 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			Amo	
City	State	Zip Code		5000.00
Mineral	VA	23117		saction ID : SE.6021
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:		<b>✗</b> Support	Office Soug	ht: House District:
TRUMP, DONALD J., , ,		Oppose	X Presid	
Calendar Year-To-Date Per Election for Office Sought		224500.00	Disburseme	
Full Name of Payee	,	Memo		Other (specify) ▶ of Public Distribution/Dissemination
Media Bridge LLC		□ Iviemo	item Bate	M
Mailing Address				10 27 2020
200 Lake Front Drive, #200			Amo	unt
City	State	Zip Code		800.00
Mineral	VA	23117		nsaction ID : SE.6023 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/		10 27 2020
		Type 004		
Name of Federal Candidate:		<b>x</b> Support	Office Soug	
LOOMER, LAURA, , ,		Oppose	Presid	dent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7	492323.00	Disburseme	ent For: Primary <b>X</b> General Other (specify) ▶
				Carlot (openity) >
(a) SUBTOTAL of Itemized Independent Expenditures	j		· •	5800.00
(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	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 36 OF 39
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 New Journey PAC		☐ Memo	Item Date	of Public Distribution/Dissemination
New Journey I Ao				10 19 7 2020
Mailing Address 7750 Okeechobee Blvd			Amou	nt
Ste 4-366		1	741104	
City	State	Zip Code		17500.00
West Palm Beach	FL	33411		saction ID : SE.5622 of Disbursement or Obligation
Purpose of Expenditure Door Knocking		Category/ Type 004		10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office Sough	nt: Nouse District: 21
LOOMER, LAURA, , ,		Oppose	Presid	
Calendar Year-To-Date		Tankanian i	Disbursemer	nt For: Primary Seneral
Per Election for Office Sought	7-1-1-7	442560.00	<sup>2020</sup>	Other (specify)
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
New Journey PAC			[7	10 21 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 7750 Okeechobee Blvd				
Ste 4-366			Amou	nt
City	State	Zip Code		5000.00
West Palm Beach	FL	33411	l l	saction ID : SE.5639 of Disbursement or Obligation
Purpose of Expenditure Door Knocking	-	Category/		M M / D D / Y Y Y Y
Door Miceking		Type 004	_   _ L	10 21 2020
Name of Federal Candidate:		🗶 Support	Office Sough	nt: Nouse District: 21
LOOMER, LAURA, , ,		Oppose	Presid	ent Senate State: FL
Calendar Year-To-Date		447560.00	Disbursemer	nt For: Primary General
Per Election for Office Sought	7 7	117000.00	<sup>2020</sup>	Other (specify)
			_	
(a) SUBTOTAL of Itemized Independent Expenditures	·		· •	22500.00
(b) SUPTOTAL of Uniterprized Independent Expanditu	roo			
(b) SUBTOTAL of Unitemized Independent Expenditu	165		•	
(c) TOTAL Independent Expenditures			<b>•</b>	
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	led1	M = M /	
Signature	<sub>г</sub> _исиониану Г н	_ Date	9 01	28 2021

TEMIZED INDEPENDENT EXPENDITURES				PAGE 37 OF 39
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
				G GOODE IE
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
New Journey PAC				10 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 7750 Okeechobee Blvd			Ama	
Ste 4-366			Amo	uni
City	State	Zip Code		25000.00
West Palm Beach	FL	33411		saction ID : SE.6017 of Disbursement or Obligation
Purpose of Expenditure Door Knocking		Category/ Type 004		M M / D D / Y Y Y Y Y 1 Y 1 1 2 1 2 1 2 1 2 1 2 1 2
Name of Federal Candidate:		<b>✗</b> Support	Office Soug	ht: X House District: 21
LOOMER, LAURA, , ,		Oppose	Presi	
Calendar Year-To-Date		'''	Disburseme	ent For: Primary Seneral
Per Election for Office Sought	7	487523.00	2020	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date	of Public Distribution/Dissemination
Ram Advertising LLC				10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1000 Southern Blvd				
Suite 300			Amo	unt
City	State	Zip Code		100000.00
West Palm Beach	FL	33405		nsaction ID : SE.5613 of Disbursement or Obligation
Purpose of Expenditure Radio Advertising		Category/		M M / D D / Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1
		Type 004		10 10 2020
Name of Federal Candidate:		<b>x</b> Support	Office Soug	
LOOMER, LAURA, , ,		Oppose	Presi	dent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		415060.00	Disburseme	ent For: Primary General
rei Liection foi Office Sought	7 7		2020	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures			•	125000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
(-,				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	ed1 -	M = M /	D D / Y Y Y Y Y
Signature	un omeany 1'll	Date	9 01	28 2021

TIEMIZED INDEFENDENT EXPENDITORES	•		PAGE 38 OF 39 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 Man / Dad / Yayayay
Full Name of Payee Ram Advertising LLC		☐ Memo	M = M / D = D / Y = Y = Y
Mailing Address 1000 Southern Blvd			10 19 2020 Amount
Suite 300			Allouit
City	State Zip Code		60000.00
West Palm Beach	FL	33405	Transaction ID : SE.5614  Date of Disbursement or Obligation
Purpose of Expenditure Radio Advertising		Category/ Type 004	10 19 / 2020
Name of Federal Candidate:		<b>✗</b> Support	Office Sought: X House District: 07
KLACIK, KIMBERLY, , ,		Oppose	President Senate State: MD
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	60000.00	Disbursement For:  Primary  General 2020  Other (specify) ▶
Full Name of Payee		☐ Memo	Item Date of Public Distribution/Dissemination
Ram Advertising LLC			10 19 2020
Mailing Address 1000 Southern Blvd			Amount
Suite 300	Ta		40000 00
City West Palm Beach	State FL	Zip Code 33405	40000.00 Transaction ID : SE.5618
Purpose of Expenditure			Date of Disbursement or Obligation
Radio Advertising		Category/ Type 004	
Name of Federal Candidate:		<b>x</b> Support	Office Sought:
SHEDD, TIFFANY, , ,		Oppose	President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	· · · · ·	190697.00	Disbursement For: ☐ Primary <b>X</b> General 2020 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es		100000.00
(-)			
(b) SUBTOTAL of Unitemized Independent Expendit	ures		<b>&gt;</b>
(c) TOTAL Independent Expenditures			<b>&gt;</b>
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 it	date or authorized	•	• • • • • • • • • • • • • • • • • • • •
Edwards, Paula, , ,	[Electronically File	ed] Date	e 01 28 2021
Signature		_ Duit	

TEMIZED INDEPENDENT EXPENDITURES				PAGE 39 OF 39
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X  FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
				G 00025421
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 D	Date of Public Distribution/Dissemination
Ram Advertising LLC				10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1000 Southern Blvd				mount
Suite 300		,		inount
City	State	Zip Code		30000.00
West Palm Beach	FL	33405		Transaction ID: SE.5620 Date of Disbursement or Obligation
Purpose of Expenditure Television Advertising		Category/ Type 004	4	10 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate:		<b>X</b> Support	Office S	Sought: House District: 02
CRAFTS, DALE, , ,		Oppose		resident Senate State: ME
Calendar Year-To-Date		1.5-5-5		ement For: Primary 🗶 General
Per Election for Office Sought	<u></u>	84473.00	2020	Other (specify) ▶
Full Name of Payee		Memo	Item D	Date of Public Distribution/Dissemination
Wolf, August, , ,				11 03 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3714 Red Maple Circle				
			A	mount
City	State	Zip Code		2950.00
Del Ray Beach	FL	33445	I	Transaction ID : SE.6643 Date of Disbursement or Obligation
Purpose of Expenditure Election Day Support Sign Deployment		Category/		M M / D D / Y Y Y Y
Election Day Support Sign Deployment		Type		11 05 2020
Name of Federal Candidate:		<b>x</b> Support	Office S	Sought: House District: 21
LOOMER, LAURA, , ,		Oppose	Pi	resident Senate State: FL
Calendar Year-To-Date		495273.00		ement For: Primary 🗶 General
Per Election for Office Sought	7 7	100270.00	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i		· •	32950.00
(h) CURTOTAL of Unitersity of Index or death Funancial			Г	
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	632685.00
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	led1 -	M = M	/ D D / Y Y Y Y
Signature		_ Date	e 01	28 2021