PAGE 1 / 13

FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURIVI 3A	For	Other Than I	An Authorized	d Commi	ttee		Office Use O	nly	
1. NAME OF COMMITTEE (in f		E OR PRINT ▼		ample: If typer the lines.		12FE4M	5		
, American Libert	ty Fund								
ADDRESS (number and		300 Astarita Ave							
▼ Check if diffe									
than previous reported. (AC	ly C)	artlow					22534		
2. FEC IDENTIFICA	ATION NUMB	ER ▼	CITY ▲			STATE A	ZIP	CODE ▲	
C C00623421			3. IS THIS REPORT	×	NEW (N) OR	AN (A)	MENDED		
4. TYPE OF REP	ORT (D) Monthly Report Due On:	Feb 20 (M2)	- 1	May 20 (M5)		20 (M8)	(Non-E Year O	20 (M11) Election Only) 20 (M12)
(a) Quarterly Repo	orts:	I.	Mar 20 (M3)		Jun 20 (M6) Jul 20 (M7)		20 (M9)	(Non-E Year O	lection nly)
April 15 Quarterly	Report (Q1)	(c) 12-Day	Apr 20 (M4)	Drimory (1)			20 (M10)	-	81 (YE) ff (12R)
July 15 Quarterly	Report (Q2)	PRE-Ele Report fo		Primary (1:		General Special (Nulloi	II (IZN)
October of Quarterly	15 Report (Q3)	периги	or the.	Convention					
January 3 Year-End	31 Report (YE)		Election on	08	18	2020		the ate of	FL
Year Only	lon-election /) (MY)	(d) 30-Day POST-E Report for		General (3	0G)	Runoff (30R)	Speci	al (30S)
Terminatio (TER)	on Report		Election on	M = M	/ D = D /	Y		the ate of	
5. Covering Period	07	01 / Y	2020	through	07_	29	2020	Y	
I certify that I have ex-		eport and to the dwards, Paula, ,		wledge and	d belief it is tru	ue, correct an	d complete.		
Type or Print Name of		,,							
Signature of Treasurer	Edwards, F	Paula, , ,		[Electronica	ully Filed] [Date 08	04	202	0
NOTE: Submission of fa	ulse, erroneous,	or incomplete in	nformation may su	ubject the p	erson signing tl	nis Report to t	ne penalties o	f 52 U.S.C	. § 3010
Office Use								ORM 3	X

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name American Liberty Fund 07 01 2020 07 29 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 -1.00Beginning of Reporting Period..... 170000.00 170038.09 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 170005.00 169999.00 6(a) and 6(c) for Column B)..... 13186.19 13192.19 7. Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 156812.81 156812.81 (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

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts FEC Form 3X (Rev. 05/2016) Page 3 Write or Type Committee Name American Liberty Fund 07 01 2020 07 29 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 170000.00 170000.00 (i) Itemized (use Schedule A)..... (ii) Unitemized 0.00 5.00 (iii) TOTAL (add 170005.00 170000.00 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 170005.00 170000.00 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 14. Loan Repayments Received..... 0.00 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 0.00 0.00 Political Committees..... 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).....

(b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).		0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶	170000.00	170038.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)▶	170000.00	170038.09
I		ı

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 Expend (a) Allocated Fed Activity (from	leral/Non-Federal			
• •	Schedule H4) Share	0.00	0.00	
(i) i ederal	Silate	45 45 45 45	1 1 1 1 1 1 1 1	
, ,	eral Share	0.00	0.00	
(b) Other Federa Expenditures	······	826.19	832.19	
• •	ng Expenditures (a)(ii), and (b))	826.19	832.19	
. Transfers to Affilia		020.10		
Committees Contributions to		0.00	0.00	
Federal Candidate	es/Committees I Committees	0.00	0.00	
Independent Expe		10000.00		
(use Schedule E) Coordinated Party (52 U.S.C. § 3011	Expenditures 6(d))	12360.00	12360.00	
(use Schedule F).		0.00	0.00	
. Loan Repayments	Made	0.00	0.00	
		0.00	0.00	
Refunds of Contril. (a) Individuals/Pe Than Political		0.00	0.00	
		0.00	0.00	
(b) Political Party(c) Other Politica	Committees	0.00	0.00	
` '	Ss)	0.00	0.00	
(d) Total Contribu				
(add Lines 28	8(a), (b), and (c))	0.00	0.00	
Other Disburseme	,			
Non-Federal Dona	tions)	0.00	0.00	
	activity (52 U.S.C. § 30101(20)) leral Election Activity			
(from Schedu	le H6)			
(i) Federal Sh	nare	0.00	0.00	
, ,	nare	0.00	0.00	
	ion Activity Paid	7 7 7	4 4	
-	Federal Funds Election Activity (add	0.00	0.00	
Lines 30(a)(i)	, 30(a)(ii) and 30(b))	0.00	0.00	
Total Disbursemer	nts (add Lines 21(c), 22,			
23, 24, 25, 26, 27	7, 28(d), 29 and 30(c))	13186.19	13192.19	
Total Federal Disb				
	a)(ii) and Line 30(a)(ii)	1010010		
110111 LINE 31/		13186.19	13192.19	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 170000.00 170005.00 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 170005.00 170000.00 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 826.19 832.19 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 33.09 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 826.19 799.10 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

ı	FO	K LINE	NOWREK	: PAC	aE 6 OI	- 13		
	(check only one)							
	>	1 1a	11b	11c	12			
		13	14	15	16	17		

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) American Liberty Fund Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Shillman, Robert, , , Date of Receipt Mailing Address 6857 Rancho Valencia Road 2020 City State Zip Code Transaction ID: SA11AI.5005 CA Rancho Santa Fe 92067 Amount of Each Receipt this Period FEC ID number of contributing C 10000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Cognex Corporation Executive Contribution Receipt For: Aggregate Year-to-Date ▼ Primary General 10000.00 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Topper, Lewis, , , Date of Receipt Mailing Address 212 Teasure Place 07 2020 City State Zip Code Transaction ID: SA11AI.5001 FL Jupiter 33469 Amount of Each Receipt this Period FEC ID number of contributing 60000.00 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) 60000.00 \triangle C.

	-	4 4		
Full Name of Individual (Last, First, Middle In Topper, Lewis, , ,	Date of Receipt			
Mailing Address 212 Teasure Place	07 16 2020			
City	State	Zip Code	Transaction ID : SA11AI.5003	
Jupiter	FL	33469	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	100000.00			
Name of Employer (for Individual)	Occupa	ation (for Individual)	Memo Item	
Self Employed	Execut	ive	Contribution	
Receipt For: Primary General Other (specify)	Aggregate Ye	ear-to-Date ▼ 160000.00		
NUDTOTAL of Passints This Pass (autisms)			170000.00	

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

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

170000.00

17

Any information copied from such Reports and State of for companying purposes, other than union the purposes.	I LISE SENS	oroto ochodula/a	FOR LINE		F 13	
Any information copied from such Reports and State		arate schedule(s) category of the	(check only			
Any information copied from such Reports and State		Summary Page	X 21b 28a	22 23 26 27 28b 28c 29 30b		
or for commercial purposes, other than using the pr	ements may	not be sold or use			ons	
of for confinercial purposes, other than using the na	ame and add	ress of any politica	al committee to	solicit contributions from such committee	e	
NAME OF COMMITTEE (In Full)						
American Liberty Fund						
Full Name (Last, First, Middle Initial)						
A. Apple.com				Date of Disbursement		
				M M / D D / Y Y Y	Y	
Mailing Address 1 Infinite Loop				07 13 2020		
City	State	Zip Code		FEC Identification Number		
Cupertino	CA	95014				
Purpose of Disbursement Computer Hardware			001	C		
Candidate Name				Transaction ID : SB21B.5006 Amount of Each Disbursement this Po	ariad	
			Category/ Type		-	
	ement For:			736.05		
Senate President	Other (spe	General				
State: District:	_ officer (spe	Giry) ♥		Memo Item		
Full Name (Last, First, Middle Initial)						
B. Apple.com				Date of Disbursement		
				07 13 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 1 Infinite Loop						
City	State	Zip Code		FEC Identification Number		
Cupertino	CA	95014				
Purpose of Disbursement Computer Hardware			001	C		
Candidate Name				Transaction ID : SB21B.5008 Amount of Each Disbursement this Pe	ariod	
			Category/ Type	Amount of Lacif Disbulsement tills Po	CHOU	
	ement For:			82.14		
Senate President	Primary Other (spe	General				
State: District:	_ Cirioi (spe	On y)		Memo Item		
Full Name (Last, First, Middle Initial)						
C.				Date of Disbursement		
				M M / D D / Y Y Y Y	r	
Mailing Addross					_	
Mailing Address	State	Zip Code		FEC Identification Number		
Mailing Address City	State					
City	State			0		
	State			С		
City	State		Category/	Amount of Each Disbursement this Po	eriod	
City Purpose of Disbursement Candidate Name			Category/ Type		eriod	
City Purpose of Disbursement Candidate Name Office Sought: House Disburs	ement For:	Concret			eriod	
City Purpose of Disbursement Candidate Name	ement For:	General cify) ▼		Amount of Each Disbursement this Po	eriod	
City Purpose of Disbursement Candidate Name Office Sought: House Disburs Senate	ement For:				eriod	
City Purpose of Disbursement Candidate Name Office Sought: House Senate President	ement For:			Amount of Each Disbursement this Po		
City Purpose of Disbursement Candidate Name Office Sought: House Senate President	ement For: Primary Other (spe	cify) \blacktriangledown	Type	Amount of Each Disbursement this Po		

TEMIZED INDEPENDENT EXPENDITURES				PAGE 8 OF 13 FOR LINE 24 OF FORM 3X
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
American Liberty Fund				C C00623421
				C 000023421
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	of Public Distribution/Dissemination
Facebook				07
Mailing Address 1 Hacker Way			Amour	nt
City	State	Zip Code	-	860.00
Menlo Park	CA	94025		action ID : SE.5019 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	М	07 17 2020
Name of Federal Candidate:		✗ Support	Office Sough	t: X House District: 21
LOOMER, LAURA, , ,		Oppose	Preside	ent Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	7 7	2160.00	Disbursemen 2020 O	t For: Primary General ther (specify) ▶
Full Name of Payee		☐ Memo	Item Date of	of Public Distribution/Dissemination
Facebook			М	07 / DDD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way				
,			Amour	nt
City	State	Zip Code		2400.00
Menlo Park	CA	94025		action ID: SE.5020 of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		07 DDD / YYYY
Name of Federal Candidate:		x Support	Office Sough	t: K House District: 21
LOOMER, LAURA, , ,		Oppose	Preside	ent Senate State: FL
Calendar Year-To-Date		4560.00	Disbursemen	t For: 🗶 Primary General
Per Election for Office Sought	7 7	1000.00	²⁰²⁰	ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				3260.00
(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	adl	M = M /	
Signature	ъссновисану Е и	eaj Date	9 08	04 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 9 OF 13
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 Y
Full Name of Payee Facebook		☐ Memo	Item Da	te of Public Distribution/Dissemination
1 acebook				07 27 / 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
O'h	04-4-	7:- 0-1-		
City Menlo Park	State CA	Zip Code 94025	Tr	2000.00 ansaction ID : SE.5016
	CA	94023		te of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		07
Name of Federal Candidate:		✗ Support	Office So	ught: K House District: 19
DONALDS, BYRON, , ,		Oppose	Pre	sident Senate State: FL
Calendar Year-To-Date		4000.00	Disbursen	nent For: 🗶 Primary General
Per Election for Office Sought	7-1-1-7-	4000.00	2020	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	te of Public Distribution/Dissemination
Facebook				07 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1 Hacker Way			۸~	ount
			All	ount
City	State	Zip Code		900.00
Menlo Park	CA	94025		ansaction ID : SE.5017 te of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004		07 28 7 2020
Name of Federal Candidate:		✗ Support	Office So	ught: X House District: 19
DONALDS, BYRON, , ,		Oppose	Pre	sident Senate State: FL
Calendar Year-To-Date		4900.00	Disbursen	nent For: 🗶 Primary General
Per Election for Office Sought	7-1-1-7-	4900.00	2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	i			2900.00
(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, , ,	(Fleetronically E:1	adl	M = M	/ D D / Y Y Y Y Y
Signature	[Electronically File	eaj Date	9 08	04 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 10 OF 13
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
Full Name of Payee Facebook		☐ Memo	Item Da	ate of Public Distribution/Dissemination
racebook				07
Mailing Address 1 Hacker Way			Δr	nount
		T = 0 .	/ï	
City	State	Zip Code 94025	L	1800.00 ransaction ID : SE.5018
Menlo Park	CA	94025		ate of Disbursement or Obligation
Purpose of Expenditure Digital Advertising		Category/ Type 004	1	07
Name of Federal Candidate:		X Support	Office So	ought: X House District: 19
DONALDS, BYRON, , ,		Oppose	Pre	esident Senate State: FL
Calendar Year-To-Date		0700.00		ment For: 🗶 Primary General
Per Election for Office Sought	7 7	6700.00	2020	Other (specify) ▶
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Keith Ablow Creative				07 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 36 Water Street				
			Ar	nount
City	State	Zip Code		500.00
Newburyport	MA	01950		ransaction ID : SE.5014 ate of Disbursement or Obligation
Purpose of Expenditure Political Ad Scripts		Category/		07 15 2020
·		Type 004		
Name of Federal Candidate:		x Support	Office So	•
DONALDS, BYRON, , ,		Oppose	Pre	esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		2000.00	Disburse 2020	ment For: 🗶 Primary General
Fel Election for Office Sought	7 7		2020	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures			· •	2300.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		. г	
(b) 00010 TAE of Officernized macpendant Experiate				
(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	e 08	04 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 11 OF 13
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 - Y
Full Name of Payee Keith Ablow Creative		☐ Memo	Item Da	ate of Public Distribution/Dissemination
Tellity blow Glodive				07 17 2020
Mailing Address 36 Water Street			Aı	mount
City	State	Zip Code	— г	500.00
Newburyport	MA	01950		ransaction ID : SE.5015
Purpose of Expenditure	IVI/ C			ate of Disbursement or Obligation
Political Ad Scripts		Category/ Type 004	1	07 17 2020
Name of Federal Candidate:		X Support	Office So	ought: House District: 21
LOOMER, LAURA, , ,		Oppose	Pr	esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		1300.00	Disburse	ment For: 🗶 Primary 🗌 General
	7 7			Other (specify) ▶
Full Name of Payee Keith Ablow Creative		☐ Memo	Item Da	ate of Public Distribution/Dissemination
				07 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 36 Water Street			Aı	mount
City	State	Zip Code	— г	500.00
Newburyport	MA	01950		ransaction ID : SE.5012
Purpose of Expenditure			D:	ate of Disbursement or Obligation
Political Ad Scripts		Category/ Type 004		07 27 7 2020
Name of Federal Candidate:		✗ Support	Office So	ought: House District: 21
LOOMER, LAURA, , ,		Oppose	Pro	esident Senate State: FL
Calendar Year-To-Date Per Election for Office Sought		5060.00	Disburse	ment For: 🗶 Primary General
Per Election for Office Sought	7 7		2020	Other (specify) ▶
			г	
(a) SUBTOTAL of Itemized Independent Expenditures			•	1000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		Г	
(,,				
(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	led1	M = M	/ D D / Y Y Y Y
Signature		_ Date	e 08	04 2020

TEMIZED INDEPENDENT EXPENDITURES				PAGE 12 OF 13	
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 = M / D = D / Y = Y = Y	
Full Name of Payee		☐ Memo	Item Dat	te of Public Distribution/Dissemination	
Keyser Medía				07 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 10 Huntsman Court			Am	ount	
City	State	Zip Code	— F	600.00	
Simpsonville	sc	29680		Insaction ID : SE.5021 te of Disbursement or Obligation	
Purpose of Expenditure Newsletter Publication		Category/ Type 004		07 / 27 / 2020	
Name of Federal Candidate:		✗ Support	Office Sou	ught: K House District: 21	
LOOMER, LAURA, , ,		Oppose		sident Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	5660.00	Disbursem 2020	nent For: Primary General Other (specify) ▶	
Full Name of Payee		Memo	Item Dat	te of Public Distribution/Dissemination	
SMA Communications				07 14 2020	
Mailing Address 6853 SW 18th Street				07 14 2020	
Suite M-200			Am	ount	
City	State	Zip Code		1500.00	
Boca Raton	FL	33433		ansaction ID : SE.5009 te of Disbursement or Obligation	
Purpose of Expenditure Data Processing		Category/ Type 004		07 / 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	ught: 🗶 House District:19	
DONALDS, BYRON, , ,		Oppose	Pres	sident Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought		1500.00	Disbursem	nent For: 🗶 Primary General	
Tel Election for Chiec Gought	7 7			Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures			• <u> </u>	2100.00	
(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 Fil	ed1	M = M	/ D D / Y Y Y Y	
Signature	<u> Баса опишну Г</u> Ш	Date	9 08	04 2020	

ITEMIZED INDEPENDENT EXPENDITURES				PAGE 13 OF 13 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
Full Name of Payee		Memo	Item Date	of Public Distribution/Dissemination
SMA Communications			_	07 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 6853 SW 18th Street			Amou	nt
Suite M-200 City	State	Zip Code		800.00
Boca Raton	FL	33433		saction ID : SE.5011 of Disbursement or Obligation
Purpose of Expenditure Data Processing		Category/ Type 004		07 14 2020
Name of Federal Candidate:		✗ Support	Office Sough	nt: Nouse District: 21
LOOMER, LAURA, , ,		Oppose	Presid	
Calendar Year-To-Date Per Election for Office Sought		800.00	Disbursemer	
	,		1	Other (specify)
Full Name of Payee		☐ Memo	ROIII	of Public Distribution/Dissemination
				M M / D D / Y Y Y Y
Mailing Address			Amou	nt
City	State	Zip Code		
City	State	Zip Code		
Purpose of Expenditure		0-1	Date	of Disbursement or Obligation
		Category/ Type		M = M / D = D / Y = Y = Y
Name of Federal Candidate:		Support	Office Sough	nt: House District:
		Oppose	Presid	ent Senate State:
Calendar Year-To-Date			Disbursemer	nt For: Primary General
Per Election for Office Sought	<u></u>			Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures				800.00
(b) SUBTOTAL of Unitemized Independent Expenditure	res		· •	
(c) TOTAL Independent Expenditures			•	12360.00
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] Date	e 08	04 2020
Signature	<u>-</u>	_ Date	5 00	2. 2020