## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)		PAGE 1 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼	
American Liberty Fund			
		C C00623421	
Check if 24-hour report 48-hour report New	report Amends repo	rt filed on	
Full Name of Payee		Date of Public Distribution/Dissemination	
Media Bridge LLC		08 11 2020	
Mailing Address 200 Lake Front Drive, #200		Amount	
City State	Zip Code	10000.00	
Mineral VA	23117	Transaction ID : SE.5068  Date of Disbursement or Obligation	
Purpose of Expenditure Video Ad	Category/ Type 004	08 / D D / 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 Sought:  House District: 21	
LOOMER, LAURA, , ,	Oppose	President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought	20873.00	Disbursement For:   ✓ Primary General  2020  Other (specify)   ✓	
Full Name of Payee Media Bridge LLC		Date of Public Distribution/Dissemination	
		08 / 11 / 2020	
Mailing Address 200 Lake Front Drive, #200		Amount	
City State	Zip Code	10000.00	
Mineral VA	23117	Transaction ID : SE.5069  Date of Disbursement or Obligation	
Purpose of Expenditure Video Ad	Category/ Type 004	08 / D D / 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 Sought:   House District: 19	
DONALDS, BYRON, , ,	Oppose	President Senate State: FL	
Calendar Year-To-Date Per Election for Office Sought	27853.13	Disbursement For:   ✓ Primary General  2020  Other (specify)   ✓	
(a) SUBTOTAL of Itemized Independent Expenditures		20000.00	
(b) SUBTOTAL of Unitemized Independent Expenditures		<b>&gt;</b>	
(c) TOTAL Independent Expenditures		<b>&gt;</b>	
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, , ,  [Elect	ronically Filed] Date	08 11 2020	
oignature			

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

Schedule E)	ADITOTILO	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In_Full)		FEC IDENTIFICATION NUMBER ▼
American Liberty Fund		C C00623421
Check if X 24-hour report 48-hour report New	report Amends report fi	led on M M / D D / Y Y Y Y Y
Full Name of Payee Media Bridge LLC		Date of Public Distribution/Dissemination
Mailing Address 200 Lake Front Drive, #200		08 11 2020 Amount
City State	Zip Code	10000.00
Mineral VA	23117	Transaction ID : SE.5070  Date of Disbursement or Obligation
Purpose of Expenditure Video Ad	Category/ Type 004	08 / 11 / 2020
Name of Federal Candidate	<b>✗</b> Support Of	fice Sought: X House District: 13
MAKKI, AMANDA, , ,	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	15900.00 Di 20	sbursement For:
Full Name of Payee	'	Date of Public Distribution/Dissemination
Mailing Address		M M M / D D / Y Y Y Y
		Amount
City State	Zip Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Of	ffice Sought: House District:
	Oppose [	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Di	sbursement For: Primary General  Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	······	10000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	30000.00
Under penalty of perjury I certify that the independent expenditu with, or at the request or suggestion of, any candidate or authority party committee) any political party committee or its agent.		
	tronically Filed] Date	08 11 2020
Signature		