

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 AMERICAN LIBERTY FUND

ADDRESS (number and street) 8111 S. US HIGHWAY 75 SUITE 200 SHERMAN TX 75091 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00623421 3. IS THIS REPORT NEW (N) OR AMENDED (A) x

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 (checked), July 31, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 11 / 29 / 2022 through 12 / 31 / 2022

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. EDWARDS, PAULA, , , Type or Print Name of Treasurer

Signature of Treasurer EDWARDS, PAULA, , , [Electronically Filed] Date 04 / 25 / 2023

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**AMERICAN LIBERTY FUND**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>		35619.50
(b) Cash on Hand at Beginning of Reporting Period.....	84014.42	
(c) Total Receipts (from Line 19) .....	492.91	1585937.24
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	84507.33	1621556.74
7. Total Disbursements (from Line 31).....	53754.71	1590804.12
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	30752.62	30752.62
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	1800.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	600.00	

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**AMERICAN LIBERTY FUND**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	356.56	1580959.27
(ii) Unitemized .....	136.35	4977.97
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	492.91	1585937.24
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	492.91	1585937.24
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(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)).....▶	492.91	1585937.24
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	492.91	1585937.24

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. 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 Expenditures .....	18847.58	644760.71
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	18847.58	644760.71
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	34907.13	946043.41
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid 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
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	53754.71	1590804.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	53754.71	1590804.12

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	492.91	1585937.24
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	492.91	1585937.24
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	18847.58	644760.71
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	18847.58	644760.71

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 16
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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**

**A. CASSERLY, BRUCE, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1751 DEWAYNE AVENUE  
 City CAMARILLO State CA Zip Code 93010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 12 / 21 / 2022  
**Transaction ID : A-43710**  
 Amount of Each Receipt this Period 50.00  
 Memo Item CONTRIBUTION

**B. HARPER, JUDY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 478 EXPERIMENT FARM ROAD  
 City MONROEVILLE State AL Zip Code 36460  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 313.12

Date of Receipt 12 / 05 / 2022  
**Transaction ID : A-43715**  
 Amount of Each Receipt this Period 156.56  
 Memo Item CONTRIBUTION

**C. RISING, SUSAN, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5215 N TWIN CITY HWY STE A  
 City PORT ARTHUR State TX Zip Code 77642  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) INFORMATION REQUESTED Occupation (for Individual) INFORMATION REQUESTED  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 26 / 2022  
**Transaction ID : A-43709**  
 Amount of Each Receipt this Period 25.00  
 Memo Item CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	231.56
<b>TOTAL</b> This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 16
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**AMERICAN LIBERTY FUND**

**A. ROBINSON, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 653 REBECCA DRIVE  
 City BOULDER CREEK State CA Zip Code 95086  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 15 / 2022  
**Transaction ID : A-43711**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item  
**CONTRIBUTION**

**B. TISCHER, LARRY, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3850 WICKER ROAD  
 City INDIANAPOLIS State IN Zip Code 46217  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2022  
**Transaction ID : A-43714**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item  
**CONTRIBUTION**

**C.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	356.56

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**AMERICAN LIBERTY FUND**

Full Name (Last, First, Middle Initial)

**A. MEDIA BRIDGE LLC**

Mailing Address 8111 SOUTH US HIGHWAY 75  
SHERMAN

City MCKINNEY State TX Zip Code 75091

Purpose of Disbursement  
MANAGEMENT FEE/VIDEO PRODUCTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 02 / 2022

FEC Identification Number

C [ ]

Transaction ID : B-38704

Amount of Each Disbursement this Period

[ ] 16000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. PAULA Y. EDWARDS, CPA, MST, LLP**

Mailing Address 1629 K STREET NW  
SUITE 300

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement  
ACCOUNTING SERVICES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 01 / 2022

FEC Identification Number

C [ ]

Transaction ID : B-38706

Amount of Each Disbursement this Period

[ ] 2200.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. REVV FUNDRAISING PLATFORM**

Mailing Address 1101 K STREET  
FLOOR 8

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
MERCHANT FEES/AGENCY FEES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
12 / 31 / 2022

FEC Identification Number

C [ ]

Transaction ID : B-43718

Amount of Each Disbursement this Period

[ ] 25.58

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

[ ] 18225.58

[ ]



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**AMERICAN LIBERTY FUND**

Full Name (Last, First, Middle Initial)

**A. SIMPLETEXTING**

Mailing Address 1815 PURDY AVENUE

City MIAMI State FL Zip Code 33139

Purpose of Disbursement  
SMS MESSAGING

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
12 / 14 / 2022

FEC Identification Number

C

Transaction ID : B-38705

Amount of Each Disbursement this Period

429.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. TRUIST**

Mailing Address 2201 WISCONSIN AVE NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement  
BANK FEES

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY  
12 / 21 / 2022

FEC Identification Number

C

Transaction ID : B-38707

Amount of Each Disbursement this Period

193.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement  
MM / DD / YYYY

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

622.00

18847.58

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 10 OF 16
	FOR LINE NUMBER: (check only one)
<input checked="" type="checkbox"/>	9
<input type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**AMERICAN LIBERTY FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>FEDERAL ELECTION COMMISSION</b>			Nature of Debt (Purpose): REFUND OWED FROM OVERPAYMENT
Mailing Address 1050 FIRST STREET NORTHEAST			
City WASHINGTON	State DC	Zip Code 20463	

Outstanding Balance Beginning This Period		<b>Transaction ID : D-23358</b>	
1800.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
0.00	0.00	1800.00	

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			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	1800.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	1800.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	1800.00

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 16
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**AMERICAN LIBERTY FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DISRUPTOR RADIO</b>		Nature of Debt (Purpose): RADIO ADS 11/30-12/6	
Mailing Address 5302 COLEWAY DRIVE			
City HOLLY SPRINGS	State NC	Zip Code 27540	

Outstanding Balance Beginning This Period	Transaction ID : D-33572	
<input type="text" value="0.00"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="25000.00"/>	<input type="text" value="25000.00"/>	<input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DONORBUREAU LLC</b>		Nature of Debt (Purpose): TEXT DEPLOYMENT (11/8/2022)	
Mailing Address 1900 N CULPEPPER ST.			
City ARLINGTON	State VA	Zip Code 22207	

Outstanding Balance Beginning This Period	Transaction ID : D-33568	
<input type="text" value="1868.17"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="1868.17"/>	<input type="text" value="0.00"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>DONORBUREAU LLC</b>		Nature of Debt (Purpose): TEXT DEPLOYMENT (11/8/2022)	
Mailing Address 1900 N CULPEPPER ST.			
City ARLINGTON	State VA	Zip Code 22207	

Outstanding Balance Beginning This Period	Transaction ID : D-33570	
<input type="text" value="6038.96"/>		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
<input type="text" value="0.00"/>	<input type="text" value="6038.96"/>	<input type="text" value="0.00"/>

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	<input type="text" value="0.00"/>
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	<input type="text"/>
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	<input type="text"/>
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text"/>

**SCHEDULE D (FEC Form 3X)**

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 12 OF 16
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/>	9
<input checked="" type="checkbox"/>	10

NAME OF COMMITTEE (In Full)  
**AMERICAN LIBERTY FUND**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>LENDZION, NORMAN, , ,</b>			Nature of Debt (Purpose): VOICE OVER FOR ADS (11/30-12/6/2022)
Mailing Address 14196 SW 8TH AVE			
City OCALA	State FL	Zip Code 34473	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D-33578	
Amount Incurred This Period 2000.00	Payment This Period 2000.00	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>TONY VANDERWAAL PRODUCTIONS</b>			Nature of Debt (Purpose): VOICE OVERS FOR ADS
Mailing Address 23632 SIRUS CIRCLE			
City MURRIETA	State CA	Zip Code 92562	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D-43720	
Amount Incurred This Period 600.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 600.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor			Nature of Debt (Purpose):
Mailing Address			
City	State	Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	600.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	600.00
3) <b>TOTAL OUTSTANDING LOANS</b> from Schedule C (last page only) ..... ▶	0.00
4) <b>ADD 2) and 3)</b> and carry forward to appropriate line of Summary Page (last page only) ▶	600.00

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND
FEC IDENTIFICATION NUMBER
C C00623421

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
DONORBUREAU LLC
ADDITIONAL CONTRIBUTION MADE INFORMATION RELATED TO DEBT PAYMENT IN
Mailing Address 1900 N CULPEPPER ST.
City ARLINGTON State VA Zip Code 22207
Purpose of Expenditure TEXT DEPLOYMENT (11/8/2022)
Category/Type
Name of Federal Candidate: BOLDUC, DONALD, C.,
Support Oppose
Office Sought: House District: 00
President Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 189138.96
Disbursement For: Primary General 2022
Other (specify)

Full Name of Payee
DISRUPTOR RADIO
Mailing Address 5302 COLEWAY DRIVE
City HOLLY SPRINGS State NC Zip Code 27540
Purpose of Expenditure RADIO ADS 11/30-12/6
Category/Type
Name of Federal Candidate: WALKER, HERSCHEL,
Support Oppose
Office Sought: House District: 00
President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 0.00
Disbursement For: Primary General 2022
Other (specify) RUNOFF-2022

(a) SUBTOTAL of Itemized Independent Expenditures 25000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

EDWARDS, PAULA, ,

[Electronically Filed]

Date 04 / 25 / 2023

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND
FEC IDENTIFICATION NUMBER
C C00623421

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee DONORBUREAU LLC
Mailing Address 1900 N CULPEPPER ST.
City ARLINGTON State VA Zip Code 22207
Purpose of Expenditure TEXT DEPLOYMENT (11/8/2022)
Name of Federal Candidate: BOLDUC, DONALD, C.,
Calendar Year-To-Date Per Election for Office Sought 0.00
Disbursement For: General 2022

Full Name of Payee DONORBUREAU LLC
Mailing Address 1900 N CULPEPPER ST.
City ARLINGTON State VA Zip Code 22207
Purpose of Expenditure TEXT DEPLOYMENT (11/8/2022)
Name of Federal Candidate: MALLOY, GERALD, ,
Calendar Year-To-Date Per Election for Office Sought 0.00
Disbursement For: General 2022

(a) SUBTOTAL of Itemized Independent Expenditures 7907.13
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

EDWARDS, PAULA, ,

[Electronically Filed]

Date 04 / 25 / 2023

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND
FEC IDENTIFICATION NUMBER
C C00623421

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
LENDZION, NORMAN, , ,
Mailing Address 14196 SW 8TH AVE
City Ocala State FL Zip Code 34473
Purpose of Expenditure VOICE OVER FOR ADS (11/30-12/6/2022)
Category/Type
Date of Public Distribution/Dissemination 11/30/2022
Amount 2000.00
Transaction ID : E-38703
Date of Disbursement or Obligation 11/30/2022

Name of Federal Candidate:
WALKER, HERSCHEL, , ,
Support Oppose
Office Sought: House District: 00
President Senate State: GA
Calendar Year-To-Date Per Election for Office Sought 0.00
Disbursement For: Primary General
Other (specify) RUNOFF-2022

Full Name of Payee
DONORBUREAU LLC
ADDITIONAL CONTRIBUTION MADE INFORMATION RELATED TO DEBT PAYMENT IN
Mailing Address 1900 N CULPEPPER ST.
City ARLINGTON State VA Zip Code 22207
Purpose of Expenditure TEXT DEPLOYMENT (11/8/2022)
Category/Type
Date of Public Distribution/Dissemination 11/08/2022
Amount 1868.17
Transaction ID : E-33569
Date of Disbursement or Obligation 11/08/2022

Name of Federal Candidate:
MALLOY, GERALD, , ,
Support Oppose
Office Sought: House District: 00
President Senate State: VT
Calendar Year-To-Date Per Election for Office Sought 84668.17
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2000.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

EDWARDS, PAULA, , ,

[Electronically Filed]

Date 04/25/2023

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
AMERICAN LIBERTY FUND
FEC IDENTIFICATION NUMBER
C C00623421

Check if 24-hour report 48-hour report
New report Amends report filed on

Full Name of Payee
DISRUPTOR RADIO
ADDITIONAL CONTRIBUTION MADE INFORMATION RELATED TO DEBT PAYMENT IN
Mailing Address 5302 COLEWAY DRIVE
City HOLLY SPRINGS State NC Zip Code 27540
Purpose of Expenditure RADIO ADS 11/30-12/6
Category/Type

Date of Public Distribution/Dissemination
11 / 30 / 2022
Amount
25000.00
Transaction ID : E-33573
Date of Disbursement or Obligation
11 / 30 / 2022

Name of Federal Candidate:
WALKER, HERSCHEL, ,
Support Oppose
Office Sought: House District: 00
President Senate State: GA

Disbursement For: Primary General
2022 Other (specify) RUNOFF-2022

Full Name of Payee
LENDZION, NORMAN, ,
ADDITIONAL CONTRIBUTION MADE INFORMATION RELATED TO DEBT PAYMENT IN
Mailing Address 14196 SW 8TH AVE
City Ocala State FL Zip Code 34473
Purpose of Expenditure VOICE OVER FOR ADS (11/30-12/6/2022)
Category/Type

Date of Public Distribution/Dissemination
11 / 30 / 2022
Amount
2000.00
Transaction ID : E-33579
Date of Disbursement or Obligation
11 / 30 / 2022

Name of Federal Candidate:
WALKER, HERSCHEL, ,
Support Oppose
Office Sought: House District: 00
President Senate State: GA

Disbursement For: Primary General
2022 Other (specify) RUNOFF-2022

(a) SUBTOTAL of Itemized Independent Expenditures 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 34907.13

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

EDWARDS, PAULA, , [Electronically Filed] Date 04 / 25 / 2023
Signature