

# 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 ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00623421 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]  
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period [MM] [DD] [YYYY] through [MM] [DD] [YYYY]  
07 30 2020 through 09 30 2020

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 10 15 2020

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="2020"/>		<input type="text" value="- 33.09"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="156812.81"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="380041.85"/>	<input type="text" value="550079.94"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="536854.66"/>	<input type="text" value="550046.85"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="172883.94"/>	<input type="text" value="186076.13"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="363970.72"/>	<input type="text" value="363970.72"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="45000.00"/>	

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:  /  /

<b>I. Receipts</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	376750.00	546750.00
(ii) Unitemized .....	3291.85	3296.85
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	380041.85	550046.85
(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) .....	380041.85	550046.85
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	33.09
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)).....▶	380041.85	550079.94
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	380041.85	550079.94

**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 .....	35521.41	36353.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	35521.41	36353.60
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) .....	137362.53	149722.53
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)) ..	172883.94	186076.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	172883.94	186076.13

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	380041.85	550046.85
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	380041.85	550046.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	35521.41	36353.60
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	33.09
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	35521.41	36320.51

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 OF 28
	(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"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 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**

**A. Allen, Helen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 822810  
 City Dallas State TX Zip Code 75382  
 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 ▼ 500.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : SA11AI.5546**  
 Amount of Each Receipt this Period 500.00  
 Memo Item Contribution

**B. Grundhofer, Jerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1776 Park Ave  
 City Park City State UT Zip Code 84060  
 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 ▼ 1000.00

Date of Receipt 08 / 14 / 2020  
**Transaction ID : SA11AI.5542**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item Contribution

**C. Lomangino, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1620 S. Ocean Blvd  
 City Palm Beach State FL Zip Code 33480  
 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 ▼ 50000.00

Date of Receipt 08 / 21 / 2020  
**Transaction ID : SA11AI.5088**  
 Amount of Each Receipt this Period 50000.00  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	51500.00
<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: (check only one)	PAGE 7 OF 28
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**American Liberty Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Martin, Jim, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 27 / 2020
Mailing Address 1695 Meadow Beach Lane		<b>Transaction ID : SA11AI.5086</b>
City Mattituck	State NY	Zip Code 11952
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100000.00	
Name of Employer (for Individual) Retired	Occupation (for Individual) Retired	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 100000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Moskowitz, Michael, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 28 / 2020
Mailing Address 310 Lexington Avenue PHB		<b>Transaction ID : SA11AI.5349</b>
City New York	State NY	Zip Code 10016
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25000.00	
Name of Employer (for Individual) Self Employed	Occupation (for Individual) Finance	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 25000.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Rhein, Pete, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 14 / 2020
Mailing Address 1407 holmby avenue		<b>Transaction ID : SA11AI.5517</b>
City los angeles	State CA	Zip Code 90024
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00	
Name of Employer (for Individual) self	Occupation (for Individual) REAL ESTATE	<input type="checkbox"/> Memo Item Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	125250.00
<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 8 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**American Liberty Fund**

**A. Topper, Lewis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 212 Treasure Place  
 City Jupiter State FL Zip Code 33469  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 260000.00

Date of Receipt 08 / 24 / 2020  
**Transaction ID : SA11AI.5090**  
 Amount of Each Receipt this Period 100000.00  
 Memo Item Contribution

**B. Topper, Lewis, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 212 Treasure Place  
 City Jupiter State FL Zip Code 33469  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self Employed Occupation (for Individual) Executive  
 Receipt For:  Primary  General  Other (specify) ▼ Aggregate Year-to-Date ▼ 360000.00

Date of Receipt 09 / 29 / 2020  
**Transaction ID : SA11AI.5348**  
 Amount of Each Receipt this Period 100000.00  
 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  
 Amount of Each Receipt this Period  
 Memo Item Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	200000.00
<b>TOTAL</b> This Period (last page this line number only).....	376750.00



**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. Branch Banking and Trust Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		21		2020

Mailing Address 200 W 2nd St

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.5342**  
Amount of Each Disbursement this Period

[REDACTED] 102.50

Memo Item

City Winston Salem State NC Zip Code 27101

Purpose of Disbursement  
Bank Charges

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Branch Banking and Trust Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		25		2020

Mailing Address 200 W 2nd St

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.5343**  
Amount of Each Disbursement this Period

[REDACTED] 1.00

Memo Item

City Winston Salem State NC Zip Code 27101

Purpose of Disbursement  
Bank Charges

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Branch Banking and Trust Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2020

Mailing Address 200 W 2nd St

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.5344**  
Amount of Each Disbursement this Period

[REDACTED] 1.00

Memo Item

City Winston Salem State NC Zip Code 27101

Purpose of Disbursement  
Bank Charges

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

[REDACTED] 104.50

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

[REDACTED]

**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. Branch Banking and Trust Company**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2020

Mailing Address 200 W 2nd St

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.5345**  
 Amount of Each Disbursement this Period  
 [ ] 1.00

City Winston Salem State NC Zip Code 27101

Purpose of Disbursement Bank Charges  
 Candidate Name  
 Category/Type **001**

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

Memo Item

Full Name (Last, First, Middle Initial)

**B. Facebook**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2020

Mailing Address 1 Hacker Way

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.5035**  
 Amount of Each Disbursement this Period  
 [ ] 1500.00

City Menlo Park State CA Zip Code 94025

Purpose of Disbursement Gnereal Poll/Advertising  
 Candidate Name  
 Category/Type **004**

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

Memo Item

Full Name (Last, First, Middle Initial)

**C. Gravis Marketing**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		11		2020

Mailing Address 920 Belle Ave Ste\$1330

FEC Identification Number

**C** [ ]  
**Transaction ID : SB21B.5352**  
 Amount of Each Disbursement this Period  
 [ ] 15000.00

City Winter Springs State FL Zip Code 32708

Purpose of Disbursement General Survey/Polling  
 Candidate Name  
 Category/Type **001**

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

Memo Item

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

[ ] 16501.00

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

[ ]

**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**

**A. Media Bridge LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 200 Lake Front Drive, #200

City Mineral State VA Zip Code 23117

Purpose of Disbursement General Digital Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 05 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.5331**

Amount of Each Disbursement this Period: 272.95

Memo Item

**B. Media Bridge LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 200 Lake Front Drive, #200

City Mineral State VA Zip Code 23117

Purpose of Disbursement Digital Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 08 / 14 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.5072**

Amount of Each Disbursement this Period: 291.00

Memo Item

**C. Paula Y. Edwardds, CPA, MST, LLP**

Full Name (Last, First, Middle Initial)

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: 09 / 15 / 2020

FEC Identification Number: C

Transaction ID : **SB21B.5346**

Amount of Each Disbursement this Period: 7500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 8063.95

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

**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. SMA Communications**

Mailing Address 6853 SW 18th Street  
Suite M-200

City Boca Raton State FL Zip Code 33433

Purpose of Disbursement  
Candidate data for internal use

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.5096**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Stripe Payments Company**

Mailing Address 185 Berry Street  
Suite 550

City San Francisco State CA Zip Code 94117

Purpose of Disbursement  
Merchant Fees

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.5354**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 13 OF 28
	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>Media Bridge LLC</b>			Nature of Debt (Purpose): Unbilled Media Advertising Video Services (Estimate)
Mailing Address 200 Lake Front Drive, #200			
City Mineral	State VA	Zip Code 23117	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5592</b>	
Amount Incurred This Period 40000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 40000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Paula Y. Edwards, CPA, MST, LLP</b>			Nature of Debt (Purpose): Unbilled Accounting Services (Estimate)
Mailing Address 1629 K Street NW Suite 300			
City Washington	State DC	Zip Code 20006	

Outstanding Balance Beginning This Period 0.00	<b>Transaction ID : SD10.5593</b>	
Amount Incurred This Period 5000.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 5000.00

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)..... ▶	45000.00
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	45000.00
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) ▶	45000.00

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 Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 07/30/2020
Amount 1800.00
Transaction ID : SE.4991
Date of Disbursement or Obligation 07/30/2020

Name of Federal Candidate: DONALDS, BYRON, ,
Support Oppose
Office Sought: House Senate State: FL District: 19
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 07/31/2020
Amount 1800.00
Transaction ID : SE.4994
Date of Disbursement or Obligation 07/31/2020

Name of Federal Candidate: DONALDS, BYRON, ,
Support Oppose
Office Sought: House Senate State: FL District: 19
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3600.00
(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 10/15/2020

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 Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 08/03/2020
Amount 1800.00
Transaction ID: SE.5025
Date of Disbursement or Obligation 08/03/2020

Name of Federal Candidate: DONALDS, BYRON, ,
Support Oppose
Office Sought: House Senate State: FL District: 19
Calendar Year-To-Date Per Election for Office Sought 12100.00
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 08/05/2020
Amount 1950.11
Transaction ID: SE.5030
Date of Disbursement or Obligation 08/05/2020

Name of Federal Candidate: DONALDS, BYRON, ,
Support Oppose
Office Sought: House Senate State: FL District: 19
Calendar Year-To-Date Per Election for Office Sought 14050.11
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3750.11
(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 10/15/2020
Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Liberty Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <b>C</b> C00623421
---	--

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

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address <b>1 Hacker Way</b>			Amount <input type="text"/>		
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025</b>	<b>Transaction ID : SE.5033</b>		
Purpose of Expenditure <b>Digital Advertising</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: <b>LOOMER, LAURA, , ,</b>			Office Sought: <input checked="" type="checkbox"/> House District: <b>21</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>			Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>		
Mailing Address <b>1 Hacker Way</b>			Amount <input type="text"/>		
City <b>Menlo Park</b>	State <b>CA</b>	Zip Code <b>94025</b>	<b>Transaction ID : SE.5034</b>		
Purpose of Expenditure <b>Digital Advertising</b>		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>		
Name of Federal Candidate: <b>MAKKI, AMANDA, , ,</b>			Office Sought: <input checked="" type="checkbox"/> House District: <b>13</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>FL</b>		
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures .....	<input type="text"/>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures.....	<input type="text"/>
(c) <b>TOTAL</b> Independent Expenditures .....	<input type="text"/>

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

*Edwards, Paula, , ,*

*[Electronically Filed]*

Date  /  /

Signature



**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Liberty Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00623421</span> </div>
---	---

Check if  24-hour report  48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 14 / 2020						
Mailing Address 1 Hacker Way	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      15000.00                 </div> Transaction ID : <b>SE.5079</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 08 / 14 / 2020						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Menlo Park</td> <td>CA</td> <td>94025</td> </tr> </table>		City	State	Zip Code	Menlo Park	CA	94025
City		State	Zip Code				
Menlo Park	CA	94025					
Purpose of Expenditure Digital Advertising (Estimate)							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose EAGLE, DANE, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      55789.53                 </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>	Date of Public Distribution/Dissemination <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 28 / 2020						
Mailing Address 1 Hacker Way	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      18500.00                 </div> Transaction ID : <b>SE.5091</b> Date of Disbursement or Obligation <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span> 09 / 28 / 2020						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Menlo Park</td> <td>CA</td> <td>94025</td> </tr> </table>		City	State	Zip Code	Menlo Park	CA	94025
City		State	Zip Code				
Menlo Park	CA	94025					
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose LOOMER, LAURA, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 21 State: FL						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      18500.00                 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶						

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      33500.00                 </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      0.00                 </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> <span style="font-size: 1.2em;">M M / D D / Y Y Y Y Y Y</span>                      33500.00                 </div>

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.

Signature Edwards, Paula, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2020

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 Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020
Category/Type 004
Date of Public Distribution/Dissemination 09/28/2020
Amount 5000.00
Transaction ID: SE.5094
Date of Disbursement or Obligation 09/28/2020

Name of Federal Candidate: BOEBERT, LAUREN, ,
Support Oppose
Office Sought: House District: 02
President Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 5000.00
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Facebook
Mailing Address 1 Hacker Way
City Menlo Park State CA Zip Code 94025
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020
Category/Type 004
Date of Public Distribution/Dissemination 09/28/2020
Amount 8000.00
Transaction ID: SE.5100
Date of Disbursement or Obligation 09/28/2020

Name of Federal Candidate: SHEDD, TIFFANY, ,
Support Oppose
Office Sought: House District: 01
President Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 8000.00
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 13000.00
(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

10/15/2020

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Liberty Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold; border: 1px solid black;">C</span> C00623421             </div>
---	---

Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      09 / 28 / 2020                 </div>
Mailing Address 1 Hacker Way	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">8000.00</span> </div>
City Menlo Park State CA Zip Code 94025	<b>Transaction ID : SE.5104</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      09 / 28 / 2020                 </div>
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose RODIMER, DAN, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: NV
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">8000.00</span> </span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item <b>Facebook</b>	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      09 / 28 / 2020                 </div>
Mailing Address 1 Hacker Way	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">5000.00</span> </div>
City Menlo Park State CA Zip Code 94025	<b>Transaction ID : SE.5109</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span>                      09 / 28 / 2020                 </div>
Purpose of Expenditure Digital Advertising 9/28/2020-10/12/2020 Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose CRAFTS, DALE, , , Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: ME
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">5000.00</span> </span>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">13000.00</span> </div>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">0.00</span> </div>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> <span style="font-size: 1.2em; font-weight: bold;">13000.00</span> </div>

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.

Signature Edwards, Paula, , , [Electronically Filed] Date M M / D D / Y Y Y Y Y Y  
10 / 15 / 2020

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 Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Ad Production Category/Type 004
Date of Public Distribution/Dissemination 08/07/2020
Amount 5000.00
Transaction ID : SE.5041
Date of Disbursement or Obligation 08/07/2020

Name of Federal Candidate: DONALDS, BYRON, ,
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 19050.11
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 08/07/2020
Amount 2703.02
Transaction ID : SE.5042
Date of Disbursement or Obligation 08/07/2020

Name of Federal Candidate: DONALDS, BYRON, ,
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 21753.13
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 7703.02
(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 10/15/2020
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 Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 08/07/2020
Amount 2800.00
Transaction ID : SE.5043
Date of Disbursement or Obligation 08/07/2020

Name of Federal Candidate: DONALDS, BYRON, ,
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 24553.13
Disbursement For: Primary General
Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 08/07/2020
Amount 2000.00
Transaction ID : SE.5046
Date of Disbursement or Obligation 08/07/2020

Name of Federal Candidate: LOOMER, LAURA, ,
Support Oppose
Office Sought: House District: 21
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 12660.00
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4800.00
(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 10/15/2020
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 Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 08/07/2020
Amount 2373.00
Transaction ID: SE.5047
Date of Disbursement or Obligation 08/07/2020

Name of Federal Candidate: LOOMER, LAURA, ,
Support Oppose
Office Sought: House District: 21
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 15033.00
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Ad Production Category/Type 004
Date of Public Distribution/Dissemination 08/07/2020
Amount 1500.00
Transaction ID: SE.5048
Date of Disbursement or Obligation 08/07/2020

Name of Federal Candidate: MAKKI, AMANDA, ,
Support Oppose
Office Sought: House District: 13
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 3500.00
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 3873.00
(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 10/15/2020

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 Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Digital Advertising Category/Type 004
Date of Public Distribution/Dissemination 08/07/2020
Amount 2400.00
Transaction ID : SE.5050
Date of Disbursement or Obligation 08/07/2020

Name of Federal Candidate: MAKKI, AMANDA, , ,
Support Oppose
Office Sought: House District: 13
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 5900.00
Disbursement For: Primary General
Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Video Ad Category/Type 004
Date of Public Distribution/Dissemination 08/11/2020
Amount 10000.00
Transaction ID : SE.5045
Date of Disbursement or Obligation 08/11/2020

Name of Federal Candidate: LOOMER, LAURA, , ,
Support Oppose
Office Sought: House District: 21
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 25033.00
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 12400.00
(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 10/15/2020
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 Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Video Ad Category/Type 004
Date of Public Distribution/Dissemination 08/11/2020
Amount 10000.00
Transaction ID : SE.5059
Date of Disbursement or Obligation 08/11/2020

Name of Federal Candidate: DONALDS, BYRON, ,
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 34553.13
Disbursement For: Primary General
Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Video Ad Category/Type 004
Date of Public Distribution/Dissemination 08/11/2020
Amount 10000.00
Transaction ID : SE.5060
Date of Disbursement or Obligation 08/11/2020

Name of Federal Candidate: MAKKI, AMANDA, ,
Support Oppose
Office Sought: House District: 13
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 15900.00
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 20000.00
(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 10/15/2020

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 Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Ad Production Category/Type 004
Name of Federal Candidate: EAGLE, DANE, , ,
Office Sought: House District: 19 State: FL
Calendar Year-To-Date Per Election for Office Sought 37053.13
Disbursement For: Primary General 2020

Full Name of Payee Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Digital Advertising Category/Type 004
Name of Federal Candidate: EAGLE, DANE, , ,
Office Sought: House District: 19 State: FL
Calendar Year-To-Date Per Election for Office Sought 40789.53
Disbursement For: Primary General 2020

(a) SUBTOTAL of Itemized Independent Expenditures 6236.40
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures

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Edwards, Paula, , ,

[Electronically Filed]

Date 10 / 15 / 2020

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 Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Ad Production Category/Type 004
Date of Public Distribution/Dissemination 08/14/2020
Amount 1500.00
Transaction ID: SE.5078
Date of Disbursement or Obligation 08/14/2020

Name of Federal Candidate: BOEBERT, LAUREN, , ,
Support Oppose
Office Sought: House District: 03
President Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 1500.00
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Ad Production Category/Type 004
Date of Public Distribution/Dissemination 09/28/2020
Amount 3000.00
Transaction ID: SE.-2147483634
Date of Disbursement or Obligation 09/28/2020

Name of Federal Candidate: CRAFTS, DALE, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 8000.00
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 4500.00
(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 10/15/2020
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 Media Bridge LLC
Mailing Address 200 Lake Front Drive, #200
City Mineral State VA Zip Code 23117
Purpose of Expenditure Ad Brokerage Category/Type 004
Date of Public Distribution/Dissemination 09/28/2020
Amount 1000.00
Transaction ID: SE.-2147483633
Date of Disbursement or Obligation 09/28/2020

Name of Federal Candidate: CRAFTS, DALE, , ,
Support Oppose
Office Sought: House District: 02
President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought 9000.00
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee SMA Communications
Mailing Address 6853 SW 18th Street Suite M-200
City Boca Raton State FL Zip Code 33433
Purpose of Expenditure Phone call list Category/Type 004
Date of Public Distribution/Dissemination 08/18/2020
Amount 1500.00
Transaction ID: SE.5085
Date of Disbursement or Obligation 08/19/2020

Name of Federal Candidate: DONALDS, BYRON, , ,
Support Oppose
Office Sought: House District: 19
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 57289.53
Disbursement For: Primary General 2020 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 2500.00
(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 10/15/2020

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>American Liberty Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <span style="font-size: 2em; font-weight: bold; border: 1px solid black; padding: 2px;">C</span> C00623421
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Check if  24-hour report  48-hour report ▶ New report Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>SMA Communications</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span> 08 / 24 / 2020
Mailing Address 6853 SW 18th Street Suite M-200	Amount <span style="border: 1px solid black; padding: 2px;">1500.00</span>
City State Zip Code Boca Raton FL 33433	
Purpose of Expenditure Phone call list	
Name of Federal Candidate: DONALDS, BYRON, , ,	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 19 State: FL
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;">58789.53</span> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</span>
Mailing Address	Amount <span style="border: 1px solid black; padding: 2px;"></span>
City State Zip Code	
Purpose of Expenditure	
Name of Federal Candidate:	<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: State:
Calendar Year-To-Date Per Election for Office Sought	<span style="border: 1px solid black; padding: 2px;"></span> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">1500.00</span>
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures..... ▶	<span style="border: 1px solid black; padding: 2px;"></span>
<b>(c) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">137362.53</span>

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Edwards, Paula, , , [Electronically Filed]  
 Signature Date M M / D D / Y Y Y Y Y Y  
 10 / 15 / 2020