

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 M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 04 / 01 / 2022 through 06 / 30 / 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 08 / 11 / 2022

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**

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Page 2

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"/>	<input type="text" value="35619.50"/>	<input type="text" value="35619.50"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="147511.74"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="320625.00"/>	<input type="text" value="481310.00"/>
(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="468136.74"/>	<input type="text" value="516929.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="341960.32"/>	<input type="text" value="390753.08"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="126176.42"/>	<input type="text" value="126176.42"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="1800.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.12"/>	

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).....	320400.00	480400.00
(ii) Unitemized	225.00	910.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	320625.00	481310.00
(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)	320625.00	481310.00
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)).....▶	320625.00	481310.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	320625.00	481310.00

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	98851.40	147644.16
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	98851.40	147644.16
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)	243108.92	243108.92
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)) ..	341960.32	390753.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	341960.32	390753.08

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	320625.00	481310.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	320625.00	481310.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	98851.40	147644.16
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	98851.40	147644.16

**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 20
	(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. 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 ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 21 / 2022
Transaction ID : A-28412
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. 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 ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2022
Transaction ID : A-28416
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. 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 ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 15 / 2022
Transaction ID : A-28407
 Amount of Each Receipt this Period
 100.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	200.00
TOTAL 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 20
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<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 ▼ 500.00

Date of Receipt **05 / 15 / 2022**
Transaction ID : A-28411
 Amount of Each Receipt this Period 100.00
 Memo Item

B. 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 ▼ 600.00

Date of Receipt **06 / 15 / 2022**
Transaction ID : A-28415
 Amount of Each Receipt this Period 100.00
 Memo Item

C. 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 ▼ 240000.00

Date of Receipt **04 / 29 / 2022**
Transaction ID : A-23392
 Amount of Each Receipt this Period 80000.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....	80200.00
TOTAL 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 8 OF 20
	<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

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
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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 ▼
320000.00

Date of Receipt
MM / DD / YYYY
05 / 23 / 2022

Transaction ID : A-23391

Amount of Each Receipt this Period
80000.00

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 ▼
400000.00

Date of Receipt
MM / DD / YYYY
06 / 07 / 2022

Transaction ID : A-23390

Amount of Each Receipt this Period
80000.00

Memo Item Contribution

C. 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 ▼
480000.00

Date of Receipt
MM / DD / YYYY
06 / 24 / 2022

Transaction ID : A-23389

Amount of Each Receipt this Period
80000.00

Memo Item Contribution

SUBTOTAL of Receipts This Page (optional).....	240000.00
TOTAL This Period (last page this line number only).....	320400.00

**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

A. Carone, Raffaello, , Mr.,

Full Name (Last, First, Middle Initial)

Mailing Address 89 Tayriver

City Rocky Mount State NC Zip Code 27804

Purpose of Disbursement Consulting-Political

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 01 / 2022

FEC Identification Number: C

Transaction ID : B-23375

Amount of Each Disbursement this Period: 3569.50

Memo Item

B. Carone, Raffaello, , Mr.,

Full Name (Last, First, Middle Initial)

Mailing Address 89 Tayriver

City Rocky Mount State NC Zip Code 27804

Purpose of Disbursement Travel Expense- Meals & Entertainment

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 26 / 2022

FEC Identification Number: C

Transaction ID : B-23386

Amount of Each Disbursement this Period: 359.64

Memo Item

C. Carone, Raffaello, , Mr.,

Full Name (Last, First, Middle Initial)

Mailing Address 89 Tayriver

City Rocky Mount State NC Zip Code 27804

Purpose of Disbursement Political Consulting Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 01 / 2022

FEC Identification Number: C

Transaction ID : B-28432

Amount of Each Disbursement this Period: 930.50

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4859.64

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. Carone, Raffaello, , Mr.,		Date of Disbursement MM / DD / YYYY 06 / 30 / 2022	
Mailing Address 89 Tayriver		FEC Identification Number C [REDACTED] Transaction ID : B-23388 Amount of Each Disbursement this Period [REDACTED] 3000.00	
City Rocky Mount	State NC	Zip Code 27804	Category/ Type 001
Purpose of Disbursement Consulting -Political			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Castorani, John, , ,		Date of Disbursement MM / DD / YYYY 04 / 28 / 2022	
Mailing Address 388 E. Main St		FEC Identification Number C [REDACTED] Transaction ID : B-23397 Amount of Each Disbursement this Period [REDACTED] 3010.09	
City Orange	State NJ	Zip Code 22960	Category/ Type 001
Purpose of Disbursement Travel Expense			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Media Bridge LLC		Date of Disbursement MM / DD / YYYY 04 / 21 / 2022	
Mailing Address 8111 South US Highway 75 Sherman		FEC Identification Number C [REDACTED] Transaction ID : B-23403 Amount of Each Disbursement this Period [REDACTED] 71000.00	
City McKinney	State TX	Zip Code 75091	Category/ Type 001
Purpose of Disbursement Digital Media Ad Buy (6/14/22-6/21/22)			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 77010.09
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

A. Paula Y. Edwards, 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 and Compliance

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY
04 / 11 / 2022

FEC Identification Number
C
Transaction ID : B-23377
Amount of Each Disbursement this Period
6200.00

Memo Item

B. Roberts Public Strategies

Full Name (Last, First, Middle Initial)

Mailing Address 510 Belgrave Park

City Nashville State TN Zip Code 37215

Purpose of Disbursement Management Fee Signing Bonus

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY
06 / 07 / 2022

FEC Identification Number
C
Transaction ID : B-23399
Amount of Each Disbursement this Period
7000.00

Memo Item

C. SimpleTexting

Full Name (Last, First, Middle Initial)

Mailing Address 1815 Purdy Avenue

City Miami State FL Zip Code 33139

Purpose of Disbursement SMS Messanging

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement MM / DD / YYYY
04 / 14 / 2022

FEC Identification Number
C
Transaction ID : B-23382
Amount of Each Disbursement this Period
375.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 13575.00

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

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

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 16 / 2022

FEC Identification Number

C
Transaction ID : B-23383
Amount of Each Disbursement this Period
429.00

Memo Item

Full Name (Last, First, Middle Initial)

B. SimpleTexting

Mailing Address 1815 Purdy Avenue

City Miami State FL Zip Code 33139

Purpose of Disbursement SMS Messaging

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 14 / 2022

FEC Identification Number

C
Transaction ID : B-23384
Amount of Each Disbursement this Period
429.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SimpleTexting

Mailing Address 1815 Purdy Avenue

City Miami State FL Zip Code 33139

Purpose of Disbursement SMS Messaging

001
Category/Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 22 / 2022

FEC Identification Number

C
Transaction ID : B-23385
Amount of Each Disbursement this Period
2286.33

Memo Item

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

3144.33

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
American Liberty Fund

Full Name (Last, First, Middle Initial) A. Truist		Date of Disbursement MM / DD / YYYY 05 / 23 / 2022	
Mailing Address 2201 Wisconsin Ave NW			
City Washington	State DC	Zip Code 20007	
Purpose of Disbursement Bank Fees		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : B-23380 Amount of Each Disbursement this Period 89.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. Truist		Date of Disbursement MM / DD / YYYY 06 / 21 / 2022	
Mailing Address 2201 Wisconsin Ave NW			
City Washington	State DC	Zip Code 20007	
Purpose of Disbursement Bank Fees		<input type="checkbox"/> 001	FEC Identification Number C
Candidate Name		Category/ Type	Transaction ID : B-23381 Amount of Each Disbursement this Period 69.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address			
City	State	Zip Code	
Purpose of Disbursement		<input type="checkbox"/>	FEC Identification Number C
Candidate Name		Category/ Type	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional)..... ▶	158.00
TOTAL This Period (last page this line number only)..... ▶	98747.06

SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full) **American Liberty Fund** Transaction ID : C-23358

LOAN SOURCE Full Name (Last, First, Middle Initial) Federal Election Commission-LOAN MADE			<input checked="" type="checkbox"/> Memo Item	Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 1050 First Street Northeast				
City Washington	State DC	ZIP Code 20463		

Original Amount of Loan 1800.00	Cumulative Payment To Date 0.00	Balance Outstanding at Close of This Period 1800.00
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TERMS

Date Incurred MM / DD / YYYY 02 / 18 / 2022	Date Due MM / DD / YYYY	Interest Rate % (apr)	Secured: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
2. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
3. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []
4. Full Name (Last, First, Middle Initial)	Name of Employer		
Mailing Address	Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding: []

SUBTOTALS This Period This Page (optional)	▶	1800.00
TOTALS This Period (last page in this line only)	▶	1800.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 20
	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 Federal Election Commission			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 - 1800.00		Transaction ID : D-23358	
Amount Incurred This Period 0.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 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) SUBTOTALS This Period This Page (optional)..... ▶	1800.00
2) TOTALS This Period (last page this line number only)..... ▶	1800.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) 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 16 OF 20
	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 Carone, Raffaello, , Mr.,			Nature of Debt (Purpose): Accrued Consulting Fees
Mailing Address 89 Tayriver			
City Rocky Mount	State NC	Zip Code 27804	

Outstanding Balance Beginning This Period <input type="text" value="3569.50"/>	Transaction ID : D-23354	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="3569.50"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Carone, Raffaello, , Mr.,			Nature of Debt (Purpose): Political Consulting Fees
Mailing Address 89 Tayriver			
City Rocky Mount	State NC	Zip Code 27804	

Outstanding Balance Beginning This Period <input type="text" value="930.62"/>	Transaction ID : D-23357	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="930.50"/>	Outstanding Balance at Close of This Period <input type="text" value="0.12"/>

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Paula Y. Edwards, CPA, MST, LLP			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 <input type="text" value="6200.00"/>	Transaction ID : D-23356	
Amount Incurred This Period <input type="text" value="0.00"/>	Payment This Period <input type="text" value="6200.00"/>	Outstanding Balance at Close of This Period <input type="text" value="0.00"/>

1) SUBTOTALS This Period This Page (optional)..... ▶	<input type="text" value="0.12"/>
2) TOTALS This Period (last page this line number only)..... ▶	<input type="text" value="0.12"/>
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	<input type="text" value="1800.00"/>
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	<input type="text" value="1800.12"/>

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 8111 South US Highway 75 Sherman
City McKinney State TX Zip Code 75091
Purpose of Expenditure Digital Media Ad Buy (6/11/22-8/9/22)
Category/Type 001
Date of Public Distribution/Dissemination 06/11/2022
Amount 40000.00
Transaction ID : E-23362
Date of Disbursement or Obligation 05/31/2022

Name of Federal Candidate: White, Royce Alexander, ,
Support Oppose
Office Sought: House District: 05
President Senate State: MN
Calendar Year-To-Date Per Election for Office Sought 40000.00
Disbursement For: Primary General
Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 8111 South US Highway 75 Sherman
City McKinney State TX Zip Code 75091
Purpose of Expenditure Digital Media Ad Buy (6/11/22-8/23/22)
Category/Type 001
Date of Public Distribution/Dissemination 06/11/2022
Amount 40000.00
Transaction ID : E-23366
Date of Disbursement or Obligation 05/31/2022

Name of Federal Candidate: Loomer, Laura, ,
Support Oppose
Office Sought: House District: 11
President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought 59054.46
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 80000.00
(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 08/11/2022
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 8111 South US Highway 75 Sherman
City McKinney State TX Zip Code 75091
Purpose of Expenditure Digital Media Ad Buy (6/11/22-6/21/22)
Category/Type 001
Date of Public Distribution/Dissemination 06/11/2022
Amount 15000.00
Transaction ID : E-23368
Date of Disbursement or Obligation 05/31/2022

Name of Federal Candidate: Loomer, Laura, ,
Support Oppose
Office Sought: House Senate
District: 11 State: FL
Calendar Year-To-Date Per Election for Office Sought 59054.46
Disbursement For: Primary General
Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 8111 South US Highway 75 Sherman
City McKinney State TX Zip Code 75091
Purpose of Expenditure Digital Media Ad Buy (6/13/22-6/21/22)
Category/Type 001
Date of Public Distribution/Dissemination 06/13/2022
Amount 25000.00
Transaction ID : E-23364
Date of Disbursement or Obligation 05/31/2022

Name of Federal Candidate: Anderson, Derrick, ,
Support Oppose
Office Sought: House Senate
District: 07 State: VA
Calendar Year-To-Date Per Election for Office Sought 25000.00
Disbursement For: Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 40000.00
(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 08/11/2022
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 8111 South US Highway 75 Sherman
City McKinney State TX Zip Code 75091
Purpose of Expenditure Digital Media Ad Buy (6/14/22-6/28/22)
Category/Type 011
Date of Public Distribution/Dissemination 06/14/2022
Amount 40000.00
Transaction ID : E-23360
Date of Disbursement or Obligation 05/31/2022

Name of Federal Candidate: Bennett, John, ,
Support Oppose
Office Sought: House Senate State: OK
District: 02
Calendar Year-To-Date Per Election for Office Sought 40000.00
Disbursement For: Primary General 2022 Other (specify)

Full Name of Payee Media Bridge LLC
Mailing Address 8111 South US Highway 75 Sherman
City McKinney State TX Zip Code 75091
Purpose of Expenditure Digital Media Ad Buy (6/14/22-6/21/22)
Category/Type 001
Date of Public Distribution/Dissemination 06/14/2022
Amount 75000.00
Transaction ID : E-23370
Date of Disbursement or Obligation 06/14/2022

Name of Federal Candidate: Anderson, Derrick, ,
Support Oppose
Office Sought: House Senate State: VA
District: 07
Calendar Year-To-Date Per Election for Office Sought 100000.00
Disbursement For: Primary General 2022 Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures 115000.00
(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 08/11/2022
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 VictoryStore.com
Mailing Address 5200 SW 30th St
City Davenport State IA Zip Code 52802
Purpose of Expenditure Yard signs
Name of Federal Candidate: Loomer, Laura, , , Support
Office Sought: House District: 11 State: FL
Amount 4054.46
Transaction ID: E-23372
Date of Disbursement or Obligation 06/06/2022

Full Name of Payee VictoryStore.com
Mailing Address 5200 SW 30th St
City Davenport State IA Zip Code 52802
Purpose of Expenditure Yard Signs
Name of Federal Candidate: Loomer, Laura, , , Support
Office Sought: House District: 11 State: FL
Amount 63108.92
Transaction ID: E-23401
Date of Disbursement or Obligation 06/07/2022

(a) SUBTOTAL of Itemized Independent Expenditures 8108.92
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures 243108.92

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 08/11/2022

Signature