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

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)		
AMERICAN LIBERTY FUND	C C00623421	
Check if 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee MEDIA BRIDGE LLC	Date of Public Distribution/Dissemination	
	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 8111 SOUTH US HIGHWAY 75 SHERMAN	Amount	
City State Zip Code	e 12000.00	
MCKINNEY TX 75091	Transaction ID : E-28460 Date of Disbursement or Obligation	
Purpose of Expenditure AD BUY (8/18/2022-8/23/2022)  Category Typ	ry/ 001 M M / D D / Y Y Y Y	
Name of Federal Candidate	Support Office Sought:     House District: 02	
CORNICELLI, ROBERT MICHAEL CPT, , ,	Oppose President Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 53000.0	Disbursement For: ★ Primary General 2022 Other (specify) ▶	
Full Name of Payee MEDIA BRIDGE LLC	Date of Public Distribution/Dissemination	
	08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 8111 SOUTH US HIGHWAY 75 Amount		
SHERMAN Chata Tip Code	4000.00	
City State Zip Code MCKINNEY TX 75091	e 4000.00  Transaction ID : E-28462 Date of Disbursement or Obligation	
Purpose of Expenditure TEXTING CAMPAIGN CREATIVE (8/18/22-8/23/22)  Category Typ	ry/ 001 Mam / 010 / Y Y Y Y	
Name of Federal Candidate	Support Office Sought: X House District: 02	
CORNICELLI, ROBERT MICHAEL CPT, , ,	Oppose President Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought 53000.	Disbursement For: ▼ Primary General  Other (specify) ►	
•		
(a) SUBTOTAL of Itemized Independent Expenditures	16000.00	
(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]  Signature	dJ Date 08 / 19 / 2022	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LNDITONES	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
AMERICAN LIBERTY FUND		C C00623421
Check if 24-hour report 48-hour report New report Amends report filed on		
Full Name of Payee		Date of Public Distribution/Dissemination
MEDIA BRÍDGE LLC		08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 8111 SOUTH US HIGHWAY 75		Amount
SHERMAN		
City State	Zip Code	5000.00
MCKINNEY TX	75091	Transaction ID: E-28464  Date of Disbursement or Obligation
Purpose of Expenditure AD PRODUCTION (8/18/22-8/23/22)	Category/ Type 001	08 17 2022
Name of Federal Candidate	<b>x</b> Support Office	e Sought: X House District: 11
LOOMER, LAURA, , ,	Oppose	President Senate State: FL
Calendar Year-To-Date Per Election for Office Sought	274108.92 Disbu 2022	rrsement For:   ✓ Primary General  Other (specify)  ✓
Full Name of Payee	'	Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City State	Zip Code	
City	Zip Gode	
Purpose of Expenditure		Date of Disbursement or Obligation
	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Office	e Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbu	ursement For: Primary General
3	7	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	·····	5000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·····	21000.00
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, , ,  Signature	Electronically Filed] Date	8 19 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
5.gs.u.0		