



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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="35619.50"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="160685.00"/>	<input type="text" value="160685.00"/>
(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="196304.50"/>	<input type="text" value="196304.50"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="48792.76"/>	<input type="text" value="48792.76"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="147511.74"/>	<input type="text" value="147511.74"/>
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="10700.12"/>	

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:  /  /

<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).....	160000.00	160000.00
(ii) Unitemized .....	685.00	685.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	160685.00	160685.00
(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) .....	160685.00	160685.00
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)).....▶	160685.00	160685.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	160685.00	160685.00

**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 .....	48792.76	48792.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	48792.76	48792.76
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) .....	0.00	0.00
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)) ..	48792.76	48792.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	48792.76	48792.76

**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) .....	160685.00	160685.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	160685.00	160685.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	48792.76	48792.76
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	48792.76	48792.76

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

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

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. 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 ▼ 75000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 14 / 2022  
**Transaction ID : A-18324**  
 Amount of Each Receipt this Period  
 75000.00  
 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 ▼ 160000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 24 / 2022  
**Transaction ID : A-18331**  
 Amount of Each Receipt this Period  
 85000.00  
 Memo Item Contribution

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

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	160000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	160000.00

**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. Ascend LLC**

Mailing Address 3211 English Way

City Prospect State KY Zip Code 40059

Purpose of Disbursement  
Polling Services

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 28 / 2022

FEC Identification Number  
**C**  
**Transaction ID : B-18334**  
Amount of Each Disbursement this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Federal Election Commission**

Mailing Address 1050 First Street Northeast

City Washington State DC Zip Code 20463

Purpose of Disbursement  
ADR Settlement Payment

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
02 / 18 / 2022

FEC Identification Number  
**C**  
**Transaction ID : B-18319**  
Amount of Each Disbursement this Period  
1800.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Federal Election Commission**

Mailing Address 1050 First Street Northeast

City Washington State DC Zip Code 20463

Purpose of Disbursement  
Duplicate Payment-Processing Error

**001**  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
02 / 18 / 2022

FEC Identification Number  
**C**  
**Transaction ID : B-18320**  
Amount of Each Disbursement this Period  
1800.00

Memo Item

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

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

8600.00

**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) <b>A. Hilton West Palm Beach</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2022	
Mailing Address 600 Okeechobee Blvd		FEC Identification Number C [REDACTED]	
City West Palm Beach	State FL	Zip Code 33401	<b>Transaction ID : B-18327</b>
Purpose of Disbursement Staff Travel		<input type="checkbox"/> 001	Amount of Each Disbursement this Period 1015.48
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
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>B. Hilton West Palm Beach</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2022	
Mailing Address 600 Okeechobee Blvd		FEC Identification Number C [REDACTED]	
City West Palm Beach	State FL	Zip Code 33401	<b>Transaction ID : B-18328</b>
Purpose of Disbursement Staff Travel		<input type="checkbox"/> 001	Amount of Each Disbursement this Period 937.93
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
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>C. Hilton West Palm Beach</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2022	
Mailing Address 600 Okeechobee Blvd		FEC Identification Number C [REDACTED]	
City West Palm Beach	State FL	Zip Code 33401	<b>Transaction ID : B-18329</b>
Purpose of Disbursement Staff Travel		<input type="checkbox"/> 001	Amount of Each Disbursement this Period 32.28
Candidate Name		Category/ Type	<input type="checkbox"/> Memo Item
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:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	1985.69
<b>TOTAL</b> 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) <b>A. Media Bridge LLC</b>			Date of Disbursement MM / DD / YYYY 03 / 07 / 2022	
Mailing Address 8111 South US Highway 75 Sherman			FEC Identification Number C [REDACTED] <b>Transaction ID : B-18323</b>	
City McKinney	State TX	Zip Code 75091	Amount of Each Disbursement this Period 15000.00	
Purpose of Disbursement Prepayment for Digital Advertising		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name	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>B. Media Bridge LLC</b>			Date of Disbursement MM / DD / YYYY 03 / 24 / 2022	
Mailing Address 8111 South US Highway 75 Sherman			FEC Identification Number C [REDACTED] <b>Transaction ID : B-18333</b>	
City McKinney	State TX	Zip Code 75091	Amount of Each Disbursement this Period 22000.00	
Purpose of Disbursement Prepayment for Digital Advertising		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name	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>C. SimpleTexting</b>			Date of Disbursement MM / DD / YYYY 01 / 14 / 2022	
Mailing Address 1815 Purdy Avenue			FEC Identification Number C [REDACTED] <b>Transaction ID : B-18316</b>	
City Miami	State FL	Zip Code 33139	Amount of Each Disbursement this Period 375.00	
Purpose of Disbursement SMS Messanging		Category/ Type 001	Memo Item <input type="checkbox"/>	
Candidate Name	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:				

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	37375.00
<b>TOTAL</b> 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. SimpleTexting**

Full Name (Last, First, Middle Initial)

Mailing Address 1815 Purdy Avenue

City Miami State FL Zip Code 33139

Purpose of Disbursement SMS Messaging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 14 / 2022

FEC Identification Number: C

Transaction ID : B-18318

Amount of Each Disbursement this Period: 375.00

Memo Item

**B. SimpleTexting**

Full Name (Last, First, Middle Initial)

Mailing Address 1815 Purdy Avenue

City Miami State FL Zip Code 33139

Purpose of Disbursement SMS Messaging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 14 / 2022

FEC Identification Number: C

Transaction ID : B-18326

Amount of Each Disbursement this Period: 375.00

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 750.00

**TOTAL** This Period (last page this line number only)..... ▶ 48710.69

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

**DEBTS AND OBLIGATIONS**

**Excluding Loans**

(Use separate schedule(s) for each numbered line)	PAGE 11 OF 11
	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>Carone, Rafaello, , Mr.,</b>			Nature of Debt (Purpose): Accrued Salary
Mailing Address South US Highway 75			
City Sherman	State TX	Zip Code 75091	

Outstanding Balance Beginning This Period		Transaction ID : D-23354	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
3569.50	0.00	3569.50	

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor <b>Intuit</b>			Nature of Debt (Purpose): Accrued Payroll Taxes
Mailing Address 2700 Coast Avenue			
City Mountain View	State CA	Zip Code 94043	

Outstanding Balance Beginning This Period		Transaction ID : D-23357	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
930.62	0.00	930.62	

C. 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		Transaction ID : D-23356	
0.00			
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period	
6200.00	0.00	6200.00	

1) <b>SUBTOTALS</b> This Period This Page (optional)..... ▶	10700.12
2) <b>TOTALS</b> This Period (last page this line number only)..... ▶	10700.12
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) ▶	10700.12