

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) AMERICAN LIBERTY FUND			FEC IDENTIFICATION NUMBER ▼ C C00623421		
Check if ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on / /					
Full Name of Payee DISRUPTOR RADIO			Date of Public Distribution/Dissemination / /		
Mailing Address 320 PRISM PLACE UNIT 312			Amount 10000.00		
City CORAOPOLIS		State PA	Zip Code 15108		Transaction ID : E-79719
Purpose of Expenditure RADIO ADS (7/22/2024-11/5/2024)		Category/ Type 004		Date of Disbursement or Obligation / /	
Name of Federal Candidate TRUMP, DONALD, J., ,			☒ Support ☐ Oppose		Office Sought: ☐ House District: 00 ☒ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought 30000.00			Disbursement For: ☐ Primary ☒ General 2024 ☐ Other (specify) ▶ _____		
Full Name of Payee			Date of Public Distribution/Dissemination / /		
Mailing Address			Amount 		
City		State	Zip Code		Date of Disbursement or Obligation / /
Purpose of Expenditure		Category/ Type			
Name of Federal Candidate			☐ Support ☐ Oppose		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶ 10000.00 (b) SUBTOTAL of Unitemized Independent Expenditures ▶ (c) TOTAL Independent Expenditures..... ▶ 10000.00					
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.					
Signature EDWARDS, PAULA, , ,			Date / / 07 / 24 / 2024		