FEC

STATEMENT OF

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ORGANIZATION FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. American Liberty Fund 8111 S. US HIghway 75 ADDRESS (number and street) Suite 200 (Check if address is changed) Sherman 75091 TX CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS VICTORY@AMERICANLIBERTYFUND.COM (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) AMERICANLIBERTYFUND.COM (Check if address is changed) DATE 2020 C00623421 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Edwards, Paula, Yvonne, , Type or Print Name of Treasurer Edwards, Paula, Yvonne,, [Electronically Filed] 80 2020 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FF0 =	4 (Davided 00/0000)	D 0
	orm 1 (Revised 02/2009) COMMITTEE	Page 2
	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affiliat	ion Office Sought: House Senate President	State District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Cor		_
(d)		Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f) x	This committee supports/opposes more than one Federal candidate, and is NOT a separate secommittee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fund	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Com	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

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Write or Type Committee N		
American Libe	erty Fund	
	ed Organization, Affiliated Committee, Joint Fundraising Representative, or L	eadership PAC Sponsor
NONE		
Mailing Address		
	CITY STATE	ZIP CODE
Relationship: Conne	ected Organization Affiliated Committee Joint Fundraising Representative	Leadership PAC Sponsor
Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the persor	ı in possession of committee
Edwar Full Name	ds, Paula, Yvonne, ,	
Mailing Address	1628 K Street, NW	
Walling Address	Suite 300	
	Washington DC 2	0006
Title or Position	CITY STATE	ZIP CODE
Treasurer	Z02 Telephone number	_ 669 3053
. Treasurer: List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; and g., assistant treasurer).	the name and address of
Full Name Edward of Treasurer	ds, Paula, Yvonne, ,	
Mailing Address	1628 K Street, NW	
	Suite 300	
	Washington DC 2	0006
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number 202	_ 669 _ 3053

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Full Name of Designated Cory, Agent	, Michael, Shane, ,	
Mailing Address	8111 S. US HIghway 75	
	Suite 200	
	Sherman TX CITY STATE	75091 ZIP CODE
Title or Position Board Member		540 - 929 - 0776
safety deposit boxes or Name of Bank, Deposit	ory, etc.	
Name of Bank, Deposit	ory, etc.	
Name of Bank, Deposit	Sory, etc.	
Name of Bank, Deposit	Sory, etc.	22401 1
Name of Bank, Deposit	&T 400 George St	22401
Name of Bank, Deposit	A00 George St Fredericksburg VA CITY STATE	
Name of Bank, Deposit BB8 Mailing Address	A00 George St Fredericksburg VA CITY STATE	
Name of Bank, Deposit Mailing Address Name of Bank, Deposit	A00 George St Fredericksburg VA CITY STATE	
Name of Bank, Deposit BB8 Mailing Address	A00 George St Fredericksburg VA CITY STATE	
Name of Bank, Deposit Mailing Address Name of Bank, Deposit	A00 George St Fredericksburg VA CITY STATE	
Name of Bank, Deposit Mailing Address Name of Bank, Deposit	A00 George St Fredericksburg VA CITY STATE	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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5(a)	or(h). Joint Fundraisin	g Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	С
	4.		. 20 .2	
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Sponsor
				1
	Mailing Address			
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee Join	nt Fundraising Representa	ative Leadership PAC Sponsor
•	Barton dad Amant Marit			
8.	Designated Agent: Identify Barr, Bob Full Name	by name, address (phone number – optional)		
8.	Barr, Bob			
8.	Barr, Bob	,,, 		
8.	Barr, Bob	8111 S. US HIghway 75	TX	75091
8.	Barr, Bob Full Name Mailing Address	8111 S. US HIghway 75 Suite 200 Sherman	TX STATE A	75091 ZIP CODE ▲
8.	Barr, Bob	8111 S. US HIghway 75 Suite 200 Sherman CITY	STATE A	
8. 9.	Barr, Bob Full Name Mailing Address TITLE OR POSITION Chairman of Board	Suite 200 Sherman CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE ▲ 540 - 929 - 0776
	Barr, Bob Full Name Mailing Address TITLE OR POSITION Chairman of Board Chairman of Board Depositor safety deposit boxes or ma	Suite 200 Sherman CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE ▲ 540 - 929 - 0776
	Barr, Bob Full Name Mailing Address TITLE OR POSITION Chairman of Board Chairman of Board Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	Suite 200 Sherman CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE ▲ 540 - 929 - 0776
	Barr, Bob Full Name Mailing Address TITLE OR POSITION Chairman of Board Chairman of Board Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	Suite 200 Sherman CITY ries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE ▲ 540 - 929 - 0776

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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h). Joint Fundraising		FEC ID number	C
1.		J	
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected Or	ganization, Affiliated Committee, Joint Fu	ndraising Representativ	ve, or Leadership PAC Spon
Mailing Address			
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	y name, address (phone number – optional)	oint Fundraising Represen	tative Leadership PAC S
esignated Agent: Identify b Verney, Res Full Name	y name, address (phone number – optional)		tative Leadership PAC S
esignated Agent: Identify b	y name, address (phone number – optional) ssell, , , 8111 S. US Highway 75		Leadership PAC S
esignated Agent: Identify b Verney, Res Full Name	y name, address (phone number – optional) ssell, , , 8111 S. US HIghway 75 Suite 200		
esignated Agent: Identify b Verney, Res Full Name	y name, address (phone number – optional) ssell, , , 8111 S. US HIghway 75 Suite 200 Sherman		tative Leadership PAC S
esignated Agent: Identify b Verney, Res Full Name Mailing Address TITLE OR POSITION	y name, address (phone number – optional) ssell, , , 8111 S. US HIghway 75 Suite 200		75091
esignated Agent: Identify b Verney, Res Full Name Mailing Address	y name, address (phone number – optional) ssell, , , 8111 S. US HIghway 75 Suite 200 Sherman	TX	75091
esignated Agent: Identify b Verney, Res Full Name Mailing Address TITLE OR POSITION Board Member Anks or Other Depositorie	y name, address (phone number – optional) sell, , , 8111 S. US HIghway 75 Suite 200 Sherman CITY s: List all banks or other depositories in wh	TX STATE ▲ Telephone Number	75091 ZIP CODE A 540 – 929 – 07
esignated Agent: Identify b Verney, Res Full Name Mailing Address TITLE OR POSITION Board Member Anks or Other Depositorie	y name, address (phone number – optional) sell, , , 8111 S. US HIghway 75 Suite 200 Sherman CITY s: List all banks or other depositories in wh	TX STATE ▲ Telephone Number	75091 ZIP CODE A 540 – 929 – 07
resignated Agent: Identify bound Verney, Resignated Name Full Name Mailing Address TITLE OR POSITION Board Member anks or Other Depositorie afety deposit boxes or maint ame of Bank,	y name, address (phone number – optional) sell, , , 8111 S. US HIghway 75 Suite 200 Sherman CITY s: List all banks or other depositories in wh	TX STATE ▲ Telephone Number	75091 ZIP CODE A 540 – 929 – 07
resignated Agent: Identify bound Verney, Resignated Name Full Name Mailing Address TITLE OR POSITION Board Member anks or Other Depositorie afety deposit boxes or maint ame of Bank,	y name, address (phone number – optional) sell, , , 8111 S. US HIghway 75 Suite 200 Sherman CITY s: List all banks or other depositories in wh	TX STATE ▲ Telephone Number	75091 ZIP CODE A 540 – 929 – 07
resignated Agent: Identify bound Verney, Resignated Name Full Name Mailing Address TITLE OR POSITION Board Member anks or Other Depositorie affety deposit boxes or maintage affects are of Bank, epository, etc.	y name, address (phone number – optional) sell, , , 8111 S. US HIghway 75 Suite 200 Sherman CITY s: List all banks or other depositories in wh	TX STATE ▲ Telephone Number	75091 ZIP CODE A 540 – 929 – 07

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Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

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Mailing Address TITLE OR POSITION Board Member Fanks or Other Depositorial deposit boxes or mail depository, etc. Mailing Address	▼ ies: List all banks o	CITY A	Telephone N	umber	75091 ZIP CODE ▲ 540
TITLE OR POSITION Board Member Banks or Other Depositoring deposit boxes or main depository, etc.	Suite 200 Sherman In the state of the state	CITY A	Telephone N	STATE umber	ZIP CODE ▲ 540 - 929 - 077
TITLE OR POSITION Board Member Banks or Other Depositorialety deposit boxes or mai	Suite 200 Sherman In the state of the state	CITY A	Telephone N	STATE umber	ZIP CODE ▲ 540 - 929 - 077
TITLE OR POSITION TO BOARD Member	Suite 200 Sherman In the state of the state	CITY A	Telephone N	STATE umber	ZIP CODE ▲ 540 - 929 - 077
TITLE OR POSITION	Suite 200 Sherman	CITY A	Telephone N	STATE umber	ZIP CODE ▲ 540 - 929 - 077
TITLE OR POSITION	Suite 200		:	STATE A	ZIP CODE ▲
	Suite 200				
Mailing Address	Suite 200			TX	75091
Mailing Address					
Mailing Address	8111 S. US HIgh				
		way 75		1 1 1	
esignated Agent: Identify Thomas, S Full Name		prione number – option	iai)		
		Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC Sp
		CITY ▲	1	STATE ▲	ZIP CODE ▲
Relationship:		OITY :			710 0005
Mailing Address					
				1 1 1	
ame of Any Connected (Organization, Affilia	ted Committee, Joint	Fundraising Rep	resentative	e, or Leadership PAC Spons
4.			─ │ FEC ID	number	С
			 │ FEC ID	number	С
3.			FEC ID	number	C
					C