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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if X 24-hour report 48-hour report New report Amends report filed	d on Mam / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
American Media & Advocacy Group	10 28 2016
Mailing Address 815 Slaters Lane	Amount
City State Zip Code	458373.00
Alexandria VA 22314	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Media placement Category/ Type 004	10 26 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office	e Sought:
Bennett, LuAnn, , ,	President Senate State: VA
Calendar Year-To-Date Per Election for Office Sought Disb 2016	ursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure	Date of Disbursement or Obligation
Category/ Type	M - M / D - D / Y - Y - Y - Y
Name of Federal Candidate Support Office	ee Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	oursement For: Primary General Other (specify) ▶
, ,	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	458373.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	458373.00
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	·
Crosby, Caleb, , , [Electronically Filed] Date	10 29 2016
Signature	25.5