10/25/2018 20 : 41

Image# 201810259133380298 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	chedule E)		TIONES				PAGE 1	OF 1								
NAME OF COMMITTEE (In Full)							FOR SE OF FORM 24/48									
Congressional Leadership Fund						1000										
						С	C00504530									
Ch	neck if 🗶 24-hour report 🗌 48-hour report 🗶 N	New rep	ort Arr	nends repo	ort filed on	M = M	/ D D /	Y Y Y Y Y								
	Full Name of Payee				D	ate of Publi	ic Distribution	Dissemination								
	Nebo Media					^M 10	/ D D / 24	2018								
	Mailing Address PO Box 9825				A	mount										
	City State		Zip Code		— Г			198975.00								
	Arlington VA		22219			ransaction	ID : 001									
	Purpose of Expenditure Media Placement		Category/ Type			ate of Disbi	ursement or (/ D D / 19	2018								
	Name of Federal Candidate		· 	Support	Office So	ought:	X House	District: 06								
	Casten, Sean, , ,		×	Oppose	Pro	esident	Senate	State:IL								
	Calendar Year-To-Date Per Election for Office Sought		2747653.43	5	Disburse 2018	ment For:	Primary	General								
	Full Name of Payee							/Dissemination								
						M M	/ D D /	Y Y Y Y Y								
	Mailing Address															
		Ar			Amount											
	City State		Zip Code													
					Date of Disbursement or Obligation											
	Purpose of Expenditure		Category/			M M	/ D D /	Y Y Y Y								
			Туре		_											
	Name of Federal Candidate			Support	Office S	ought:	House	District:								
				Oppose	Pr	resident	Senate	State:								
	Calendar Year-To-Date				Disburse	ement For:	Primary	/ General								
	Per Election for Office Sought					Other (specify)										
 (a) SUBTOTAL of Itemized Independent Expenditures (b) SUBTOTAL of Unitemized Independent Expenditures 																
									(c) TOTAL Independent Expenditures				. Г			109075-00
																198975.00
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.																
	Crosby, Caleb, , ,				M M	/ D D	/ Y Y	YY								
	Signature	Electron	ically Filed]	Date	10	25	201	8								