

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
Congressional Leadership Fund

ADDRESS (number and street) 1747 Pennsylvania Avenue NW  
5th Floor  
 Check if different than previously reported. (ACC)  
Washington DC 20006

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** C00504530 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  through  /  /

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Crosby, Caleb, , ,  
Type or Print Name of Treasurer

Signature of Treasurer Crosby, Caleb, , , [Electronically Filed] Date  /  /

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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Page 2

Write or Type Committee Name

**Congressional Leadership 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="2017"/>		1520515.00
(b) Cash on Hand at Beginning of Reporting Period.....	1520515.00	
(c) Total Receipts (from Line 19) .....	4496473.72	4496473.72
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	6016988.72	6016988.72
7. Total Disbursements (from Line 31).....	3461936.32	3461936.32
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	2555052.40	2555052.40
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**Congressional Leadership Fund**

Report Covering the Period: From:  /  /  To:  /  /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	4486353.02	4486353.02
(ii) Unitemized .....	232.00	232.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4486585.02	4486585.02
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	4491585.02	4491585.02
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).....	4888.70	4888.70
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)).....▶	4496473.72	4496473.72
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4496473.72	4496473.72

**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 .....	506481.20	506481.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	506481.20	506481.20
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) .....	2955455.12	2955455.12
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)) ..	3461936.32	3461936.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3461936.32	3461936.32

**DETAILED SUMMARY PAGE**  
of Disbursements

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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) .....	4491585.02	4491585.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4491585.02	4491585.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	506481.20	506481.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	4888.70	4888.70
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	501592.50	501592.50

**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 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
**Congressional Leadership Fund**

**A. ANTHEM, INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 68086  
 City CINCINNATI State OH Zip Code 45206-8086  
 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 ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2017  
**Transaction ID : SA11A.1479**  
 Amount of Each Receipt this Period  
 25000.00  
 Memo Item  
**CONTRIBUTION-INAUGURATION EVENT SPONSOR**

**B. FEDERATED INVESTORS, INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1001 LIBERTY AVE  
 City PITTSBURGH State PA Zip Code 15222-3714  
 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 ▼  
 50000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2017  
**Transaction ID : SA11A.1480**  
 Amount of Each Receipt this Period  
 50000.00  
 Memo Item  
**CONTRIBUTION-INAUGURATION EVENT SPONSOR**

**C. METLIFE (METROPOLITAN LIFE INSURANCE COMPANY)**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 18210 CRANE NEST DRIVE  
 City TAMPA State FL Zip Code 33647-  
 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 ▼  
 25000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 05 / 2017  
**Transaction ID : SA11A.1481**  
 Amount of Each Receipt this Period  
 25000.00  
 Memo Item  
**CONTRIBUTION-INAUGURATION EVENT SPONSOR**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	100000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 7 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

**A. DEEP ROOT ANALYTICS LLC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1600 WILSON BLVD  
 SUITE 330  
 City ARLINGTON State VA Zip Code 22209-  
 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 ▼ 1000.00

Date of Receipt 01 / 06 / 2017  
**Transaction ID : SA11A.1482**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item  
**CONTRIBUTION-INAUGURATION EVENT SPONSOR**

**B. AT&T SERVICES, INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1120 20TH STREET NW  
 SUITE 8079  
 City WASHINGTON State DC Zip Code 20036-  
 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 ▼ 25000.00

Date of Receipt 01 / 09 / 2017  
**Transaction ID : SA11A.1483**  
 Amount of Each Receipt this Period 25000.00  
 Memo Item  
**CONTRIBUTION-INAUGURATION EVENT SPONSOR**

**C. COMPREHENSIVE HEALTH MANAGEMENT INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. BOX 31390  
 City TAMPA State FL Zip Code 33631-  
 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 ▼ 10000.00

Date of Receipt 01 / 09 / 2017  
**Transaction ID : SA11A.1484**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item  
**CONTRIBUTION-INAUGURATION EVENT SPONSOR**

**SUBTOTAL** of Receipts This Page (optional).....▶ 36000.00  
**TOTAL** This Period (last page this line number only).....▶

**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 8 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

**A. MILLERCOORS**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 482

City MILWAUKEE	State WI	Zip Code 53201-
-------------------	-------------	--------------------

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 ▼  
26291.44

Date of Receipt  
MM / DD / YYYY  
01 / 10 / 2017

**Transaction ID : SA11A.1485**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION-INAUGURATION EVENT SPONSOR

**B. SOUTHERN COMPANY SERVICES, INC.**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 241 RALPH MCGILL BLVD

City ATLANTA	State GA	Zip Code 30308-
-----------------	-------------	--------------------

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 ▼  
25000.00

Date of Receipt  
MM / DD / YYYY  
01 / 11 / 2017

**Transaction ID : SA11A.1486**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION-INAUGURATION EVENT SPONSOR

**C. ALTRIA CLIENT SERVICES LLC**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 85088

City RICHMOND	State VA	Zip Code 23285-5088
------------------	-------------	------------------------

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 ▼  
7930.58

Date of Receipt  
MM / DD / YYYY  
01 / 19 / 2017

**Transaction ID : SA11A.1489**

Amount of Each Receipt this Period  
7930.58

Memo Item  
IN KIND CONTRIBUTION-BEVERAGES FOR EVENT

<b>SUBTOTAL</b> of Receipts This Page (optional).....	57930.58
<b>TOTAL</b> This Period (last page this line number only).....	



**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 9 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

**A. MICROSOFT CORPORATION**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 901 K STREET NW  
11TH FLOOR

City WASHINGTON State DC Zip Code 20001-6441

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 ▼  
25000.00

Date of Receipt  
MM / DD / YYYY  
01 / 19 / 2017

**Transaction ID : SA11A.1487**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION-INAUGURATION EVENT SPONSOR

**B. MILLERCOORS**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 482

City MILWAUKEE State WI Zip Code 53201-

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 ▼  
26291.44

Date of Receipt  
MM / DD / YYYY  
01 / 19 / 2017

**Transaction ID : SA11A.1488**

Amount of Each Receipt this Period  
1291.44

Memo Item  
IN KIND CONTRIBUTION-BEVERAGES FOR EVENT

**C. BIOTECHNOLOGY INNOVATION ORGANIZATION (BIO)**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1201 MARYLAND AVENUE SW  
SUITE 900

City WASHINGTON State DC Zip Code 20024-6129

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 ▼  
25000.00

Date of Receipt  
MM / DD / YYYY  
01 / 24 / 2017

**Transaction ID : SA11A.1490**

Amount of Each Receipt this Period  
25000.00

Memo Item  
CONTRIBUTION-INAUGURATION EVENT SPONSOR

<b>SUBTOTAL</b> of Receipts This Page (optional).....	51291.44
<b>TOTAL</b> This Period (last page this line number only).....	

**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 10 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

**A. INTERDIGITAL ADMINISTRATIVE SOLUTIONS INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1001 EAST HECTOR STREET

City CONSHOHOCKEN	State PA	Zip Code 19428-
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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 ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2017

**Transaction ID : SA11A.1492**

Amount of Each Receipt this Period  
10000.00

Memo Item  
CONTRIBUTION-INAUGURATION EVENT SPONSOR

**B. OTSUKA AMERICA PHARMACEUTICAL, INC.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2440 RESEARCH BLVD.

City ROCKVILLE	State MD	Zip Code 20850-3238
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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 ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	24	/	2017

**Transaction ID : SA11A.1491**

Amount of Each Receipt this Period  
10000.00

Memo Item  
CONTRIBUTION-INAUGURATION EVENT SPONSOR

**C. AMERICAN PETROLEUM INSTITUTE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1220 L ST NW

City WASHINGTON	State DC	Zip Code 20005-4018
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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 ▼  
10000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	02	/	2017

**Transaction ID : SA11A.1493**

Amount of Each Receipt this Period  
10000.00

Memo Item  
CONTRIBUTION-INAUGURATION EVENT SPONSOR

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

**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 11 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

**A. EXELON**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 100 CONSTELLATION WAY  
SUITE 600C

City BALTIMORE State MD Zip Code 21202-

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 ▼  
50000.00

Date of Receipt  
MM / DD / YYYY  
02 / 06 / 2017

**Transaction ID : SA11A.1494**

Amount of Each Receipt this Period  
50000.00

Memo Item  
CONTRIBUTION-INAUGURATION EVENT SPONSOR

**B. MCINERNEY, THOMAS, E., ,**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2 MANITOU CT.

City WESTPORT State CT Zip Code 06880-6006

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
BLUFF POINT ASSOCIATES INVESTOR

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200000.00

Date of Receipt  
MM / DD / YYYY  
02 / 21 / 2017

**Transaction ID : SA11A.1495**

Amount of Each Receipt this Period  
100000.00

Memo Item  
CONTRIBUTION

**C. AMERICAN ACTION NETWORK**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1747 PENNSYLVANIA AVE. NW  
5TH FLOOR

City WASHINGTON State DC Zip Code 20006-4604

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 ▼  
3500000.00

Date of Receipt  
MM / DD / YYYY  
03 / 03 / 2017

**Transaction ID : SA11A.1497**

Amount of Each Receipt this Period  
1500000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1650000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 12 OF 52
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

**A. AMGEN INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1 AMGEN CENTER DR  
 City THOUSAND OAKS State CA Zip Code 91320-1730  
 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 ▼ 10000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 03 / 2017  
**Transaction ID : SA11A.1496**  
 Amount of Each Receipt this Period  
 10000.00  
 Memo Item  
**CONTRIBUTION-INAUGURATION EVENT SPONSOR**

**B. OPPENHEIMER, DAVID, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 165 RANDALL ST  
 City SAN FRANCISCO State CA Zip Code 94131-2724  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 GOOGLE SOFTWARE ENGINEER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 04 / 2017  
**Transaction ID : SA11A.1458**  
 Amount of Each Receipt this Period  
 1000.00  
 Memo Item  
**CONTRIBUTION**

**C. GEO CORRECTIONS HOLDINGS INC.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 621 NW 53RD ST SUITE 700  
 City BOCA RATON State FL Zip Code 33487-8242  
 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 ▼ 100000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 08 / 2017  
**Transaction ID : SA11A.1499**  
 Amount of Each Receipt this Period  
 100000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	111000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 13 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AMERICAN ACTION NETWORK**

Mailing Address 1747 PENNSYLVANIA AVE. NW  
5TH FLOOR

City WASHINGTON State DC Zip Code 20006-4604

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 ▼  
3500000.00

Date of Receipt  
03 / 15 / 2017  
**Transaction ID : SA11A.1500**

Amount of Each Receipt this Period  
2000000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B. ANTONIO, FRANKLIN, , ,**

Mailing Address 2765 CORDOBA COVE

City DEL MAR State CA Zip Code 92014-3504

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
QUALCOMM CHIEF SCIENTIST

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
03 / 20 / 2017  
**Transaction ID : SA11A.1470**

Amount of Each Receipt this Period  
5000.00

Memo Item  
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C. MCINERNEY, THOMAS, E., ,**

Mailing Address 2 MANITOU CT.

City WESTPORT State CT Zip Code 06880-6006

FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)  
BLUFF POINT ASSOCIATES INVESTOR

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
200000.00

Date of Receipt  
03 / 20 / 2017  
**Transaction ID : SA11A.1501**

Amount of Each Receipt this Period  
100000.00

Memo Item  
CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2105000.00
<b>TOTAL</b> This Period (last page this line number only).....	

**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 14 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

**A. VICKERS, MICHAEL, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15810 ELK PARK LN  
 City HOUSTON State TX Zip Code 77062-4775  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) RETIRED Occupation (for Individual) RETIRED  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 21 / 2017  
**Transaction ID : SA11A.1472**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item  
**CONTRIBUTION**

**B. MOODY, DAN, M., , JR.**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3003 WEST ALABAMA  
 City HOUSTON State TX Zip Code 77098-  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) MOODY RAMBIN Occupation (for Individual) PRINCIPAL  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2017  
**Transaction ID : SA11A.1503**  
 Amount of Each Receipt this Period  
 2000.00  
 Memo Item  
**CONTRIBUTION**

**C. CHEVRON POLICY GOVERNMENT & PUBLIC AFFAIRS**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 6042  
 City SAN RAMON State CA Zip Code 94583-0742  
 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 ▼ 250000.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 03 / 28 / 2017  
**Transaction ID : SA11A.1502**  
 Amount of Each Receipt this Period  
 250000.00  
 Memo Item  
**CONTRIBUTION**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	252500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 52  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. AMERICAN ACTION NETWORK**

Mailing Address 1747 PENNSYLVANIA AVE. NW  
5TH FLOOR

City WASHINGTON State DC Zip Code 20006

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 / D D / Y Y Y Y Y Y  
03 / 31 / 2017

Transaction ID : SA11A.1504

Amount of Each Receipt this Period  
92631.00

Memo Item  
CONTRIBUTION IN-KIND: PAYROLL/OFFICE SPACE

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

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 / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	92631.00
<b>TOTAL</b> This Period (last page this line number only).....	4486353.02

**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 16 OF 52
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

**A. STARTUPS FOR AMERICA SUPER PAC**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 137 RIVERSIDE DR.  
APT 6D

City NEW YORK State NY Zip Code 10024-

FEC ID number of contributing federal political committee. **C** C00576199

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
MM / DD / YYYY  
03 / 06 / 2017

**Transaction ID : SA11C.1498**

Amount of Each Receipt this Period  
5000.00

Memo Item  
**CONTRIBUTION**

**B.**

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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

**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  
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00



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

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 17 OF 52  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**Congressional Leadership Fund**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. TARGET ENTERPRISES**

Mailing Address 15260 VENTURA BLVD  
SUITE 1240

City SHERMAN OAKS State CA Zip Code 91403

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 ▼  
4888.70

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 02 / 08 / 2017

Transaction ID : **SB.95**

Amount of Each Receipt this Period  
4888.70

Memo Item  
MEDIA REFUND

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**B.**

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 /  D  D /  Y  Y  Y  Y

Amount of Each Receipt this Period

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**C.**

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 /  D  D /  Y  Y  Y  Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	4888.70
<b>TOTAL</b> This Period (last page this line number only).....▶	4888.70

**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)  
**Congressional Leadership Fund**

**A. PCI Payment Solutions**

Full Name (Last, First, Middle Initial)

Mailing Address 902 Chinquapin

City McLean State VA Zip Code 22102

Purpose of Disbursement Merchant fees  003 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 01 / 04 / 2017

FEC Identification Number C

**Transaction ID : SB.1**

Amount of Each Disbursement this Period 91.35

Memo Item

**B. American Express**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement Merchant fees  003 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 01 / 05 / 2017

FEC Identification Number C

**Transaction ID : SB.2**

Amount of Each Disbursement this Period 289.15

Memo Item

**C. American Express**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement Merchant fees  003 Category/Type

Candidate Name

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

State: District:

Date of Disbursement 01 / 10 / 2017

FEC Identification Number C

**Transaction ID : SB.3**

Amount of Each Disbursement this Period 7.95

Memo Item

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

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

388.45

**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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. E.C. Maruggi Incorporated</b>			Date of Disbursement MM / DD / YYYY 01 / 10 / 2017		
Mailing Address 660 South Howell St.					
City St. Paul		State MN	Zip Code 55116		
Purpose of Disbursement Business consulting				Category/Type 001	
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:		<input type="checkbox"/> Memo Item			

FEC Identification Number  
C [ ]  
**Transaction ID : SB.11**  
Amount of Each Disbursement this Period  
[ ] 1000.00

Full Name (Last, First, Middle Initial) <b>B. CMDI</b>			Date of Disbursement MM / DD / YYYY 01 / 12 / 2017		
Mailing Address 1593 Spring Hill Road Suite 400					
City Tysons Corner		State VA	Zip Code 22182		
Purpose of Disbursement Donor database subscription				Category/Type 003	
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:		<input type="checkbox"/> Memo Item			

FEC Identification Number  
C [ ]  
**Transaction ID : SB.15**  
Amount of Each Disbursement this Period  
[ ] 500.00

Full Name (Last, First, Middle Initial) <b>C. Trinity Financial Reporting &amp; Compliance</b>			Date of Disbursement MM / DD / YYYY 01 / 12 / 2017		
Mailing Address P.O. Box 710993					
City Oak Hill		State VA	Zip Code 20171		
Purpose of Disbursement Accounting and compliance				Category/Type 001	
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:		<input type="checkbox"/> Memo Item			

FEC Identification Number  
C [ ]  
**Transaction ID : SB.26**  
Amount of Each Disbursement this Period  
[ ] 8775.00

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 10275.00
<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)  
**Congressional Leadership Fund**

**A. Altria Client Services**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 85088

City Richmond State VA Zip Code 23285

Purpose of Disbursement  
In-kind: beverages for event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 19 / 2017

FEC Identification Number: C

**Transaction ID : SB.99**

Amount of Each Disbursement this Period: 7930.58

Memo Item

**B. MillerCoors**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 482

City Milwaukee State WI Zip Code 53201

Purpose of Disbursement  
In-kind: beverages for event

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 19 / 2017

FEC Identification Number: C

**Transaction ID : SB.98**

Amount of Each Disbursement this Period: 1291.44

Memo Item

**C. Delta Airlines**

Full Name (Last, First, Middle Initial)

Mailing Address 1030 Delta Boulevard

City Atlanta State GA Zip Code 30354

Purpose of Disbursement  
Airfare

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C

**Transaction ID : SB.77**

Amount of Each Disbursement this Period: 809.20

SB.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 9222.02

**TOTAL** 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)  
**Congressional Leadership Fund**

**A. First National Bank**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 2557

City Omaha State NE Zip Code 68103

Purpose of Disbursement Credit card payment-See memo entries

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB.74

Amount of Each Disbursement this Period: 7845.70

Memo Item

**B. Lotte NY Palace**

Full Name (Last, First, Middle Initial)

Mailing Address 455 Madison Ave

City New York State NY Zip Code 10022

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB.76

Amount of Each Disbursement this Period: 2484.60

SB.74

Memo Item

**C. The 201 Bar**

Full Name (Last, First, Middle Initial)

Mailing Address 201 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Event venue and catering

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 24 / 2017

FEC Identification Number: C

Transaction ID : SB.75

Amount of Each Disbursement this Period: 3452.00

SB.74

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 7845.70

**TOTAL** 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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Wiley Rein LLP**

Mailing Address 1776 K Street NW

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement  
Legal services

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 24 / 2017

FEC Identification Number

C

**Transaction ID : SB.27**

Amount of Each Disbursement this Period

11778.75

Memo Item

Full Name (Last, First, Middle Initial)

**B. Wiley Rein LLP**

Mailing Address 1776 K Street NW

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement  
Legal services

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 24 / 2017

FEC Identification Number

C

**Transaction ID : SB.28**

Amount of Each Disbursement this Period

12257.45

Memo Item

Full Name (Last, First, Middle Initial)

**C. Strategic Advance Services, LLC**

Mailing Address 611 Pennsylvania Ave. SE  
Suite 267

City  
Washington

State  
DC

Zip Code  
20003

Purpose of Disbursement  
Event venue and catering

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M /  D D D /  Y Y Y Y Y Y  
01 / 27 / 2017

FEC Identification Number

C

**Transaction ID : SB.19**

Amount of Each Disbursement this Period

68992.95

Memo Item

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

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

93029.15

**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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. PCI Payment Solutions**

Mailing Address 902 Chinquapin

City McLean State VA Zip Code 22102

Purpose of Disbursement  
Merchant fees

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
02 / 02 / 2017

FEC Identification Number  
  
**Transaction ID : SB.4**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Capitol Computer Exchange**

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement  
Computer services

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
02 / 03 / 2017

FEC Identification Number  
  
**Transaction ID : SB.33**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Computer Exchange**

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement  
Computer services

Category/Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
02 / 03 / 2017

FEC Identification Number  
  
**Transaction ID : SB.34**  
Amount of Each Disbursement this Period

Memo Item

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

**TOTAL** 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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. E.C. Maruggi Incorporated</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2017	
Mailing Address 660 South Howell St.		FEC Identification Number C [REDACTED]	
City St. Paul	State MN	Zip Code 55116	<b>Transaction ID : SB.12</b>
Purpose of Disbursement Business consulting		Category/ Type 001	Amount of Each Disbursement this Period 1000.00
Candidate Name		<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. Bliss, Corry, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20006	<b>Transaction ID : SB.78</b>
Purpose of Disbursement Travel - see memo entry		Category/ Type 002	Amount of Each Disbursement this Period 1419.18
Candidate Name		<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. Ettari, James, , ,</b>		Date of Disbursement MM / DD / YYYY 02 / 13 / 2017	
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20006	<b>Transaction ID : SB.72</b>
Purpose of Disbursement Reimbursement-see memo entry		Category/ Type 001	Amount of Each Disbursement this Period 271.87
Candidate Name		<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:			

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

2691.05

**TOTAL** 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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Airlines**

Mailing Address 4333 Amon Carter Boulevard

City Ft. Worth State TX Zip Code 76155

Purpose of Disbursement Airfare

001  
 002  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2017

FEC Identification Number

C  
Transaction ID : SB.79  
Amount of Each Disbursement this Period  
1419.18

Memo Item SB.78

Full Name (Last, First, Middle Initial)

**B. Capitol Computer Exchange**

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement Computer 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  
02 / 13 / 2017

FEC Identification Number

C  
Transaction ID : SB.35  
Amount of Each Disbursement this Period  
3111.82

Memo Item

Full Name (Last, First, Middle Initial)

**C. CMDI**

Mailing Address 1593 Spring Hill Road Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement Donor database subscription

003  
Category/Type

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
02 / 13 / 2017

FEC Identification Number

C  
Transaction ID : SB.16  
Amount of Each Disbursement this Period  
500.00

Memo Item

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

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

3611.82

**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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Fed Ex**

Mailing Address 3875 Airways

City  
Memphis

State  
TN

Zip Code  
38116

Purpose of Disbursement  
Printing

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 / 13 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.73

Amount of Each Disbursement this Period

[REDACTED] 271.87

SB.72

Memo Item

Full Name (Last, First, Middle Initial)

**B. Trinity Financial Reporting & Compliance**

Mailing Address 13051 Farthingale Dr.

City  
Oak Hill

State  
VA

Zip Code  
20171

Purpose of Disbursement  
Accounting and compliance

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 / 13 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.29

Amount of Each Disbursement this Period

[REDACTED] 6375.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Lee, Patrick, , ,**

Mailing Address 1747 Pennsylvania Ave. NW  
5th Floor

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement  
Payroll

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 / 16 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.45

Amount of Each Disbursement this Period

[REDACTED] 3614.02

Memo Item

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

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

[REDACTED] 9989.02

[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)  
**Congressional Leadership Fund**

**A. DC Finance & Treasury**

Full Name (Last, First, Middle Initial)

Mailing Address 1101 4th Street, SW  
Suite 850W

City Washington State DC Zip Code 20024

Purpose of Disbursement State taxes  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB.48

Amount of Each Disbursement this Period: 155.15

Memo Item

**B. Internal Revenue Service**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Federal taxes withheld  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB.46

Amount of Each Disbursement this Period: 1855.55

Memo Item

**C. VA Department of Taxation**

Full Name (Last, First, Middle Initial)

Mailing Address 1957 Westmoreland Street

City Richmond State VA Zip Code 23230

Purpose of Disbursement State taxes withheld  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement: 02 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB.47

Amount of Each Disbursement this Period: 289.71

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 2300.41

**TOTAL** 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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Capitol Computer Exchange**

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement Computer services  
Candidate Name  
Category/Type **001**

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

Date of Disbursement  
MM / DD / YYYY  
02 / 23 / 2017

FEC Identification Number  
**C**  
Transaction ID : **SB.36**  
Amount of Each Disbursement this Period  
2520.62

Memo Item

Full Name (Last, First, Middle Initial)

**B. First National Bank**

Mailing Address P.O. Box 2557

City Omaha State NE Zip Code 68103

Purpose of Disbursement Credit card-see memo entries  
Candidate Name  
Category/Type **001**

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

Date of Disbursement  
MM / DD / YYYY  
02 / 28 / 2017

FEC Identification Number  
**C**  
Transaction ID : **SB.20**  
Amount of Each Disbursement this Period  
13668.79

Memo Item

Full Name (Last, First, Middle Initial)

**C. Capitol Hill Club**

Mailing Address 300 First St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement Event venue and catering  
Candidate Name  
Category/Type **001**

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

Date of Disbursement  
MM / DD / YYYY  
02 / 28 / 2017

FEC Identification Number  
**C**  
Transaction ID : **SB.23**  
Amount of Each Disbursement this Period  
9527.25

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 16189.41

**TOTAL** 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)  
**Congressional Leadership Fund**

**A. M&H Limousine Service**

Full Name (Last, First, Middle Initial)

Mailing Address 1299 Pennsylvania Ave NW

City Washington State DC Zip Code 20006

Purpose of Disbursement Ground transportation

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB.22

Amount of Each Disbursement this Period: 2335.04

Memo Item

**B. Residence Inn**

Full Name (Last, First, Middle Initial)

Mailing Address 10400 Fernwood Road

City Bethesda State MD Zip Code 20817

Purpose of Disbursement Lodging

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB.21

Amount of Each Disbursement this Period: 1049.82

Memo Item

**C. Schneiders Liquor**

Full Name (Last, First, Middle Initial)

Mailing Address 300 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement Beverages for event

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 28 / 2017

FEC Identification Number: C

Transaction ID : SB.24

Amount of Each Disbursement this Period: 400.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 0.00

**TOTAL** 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)  
**Congressional Leadership Fund**

**A. Albertson, Evan, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 01 / 2017

Mailing Address: 1747 Pennsylvania Ave. NW, 5th Floor

City: Washington, State: DC, Zip Code: 20006

Purpose of Disbursement: Payroll, Category/Type: 001

Candidate Name:

Office Sought:  House,  Senate,  President; Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C  
**Transaction ID : SB.53**  
Amount of Each Disbursement this Period: 1634.29

Memo Item

**B. Lee, Patrick, , ,**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 01 / 2017

Mailing Address: 1747 Pennsylvania Ave. NW, 5th Floor

City: Washington, State: DC, Zip Code: 20006

Purpose of Disbursement: Payroll, Category/Type: 001

Candidate Name:

Office Sought:  House,  Senate,  President; Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C  
**Transaction ID : SB.49**  
Amount of Each Disbursement this Period: 3614.03

Memo Item

**C. DC Finance & Treasury**

Full Name (Last, First, Middle Initial)

Date of Disbursement: 03 / 01 / 2017

Mailing Address: 1101 4th Street, SW, Suite 850W

City: Washington, State: DC, Zip Code: 20024

Purpose of Disbursement: State taxes, Category/Type: 001

Candidate Name:

Office Sought:  House,  Senate,  President; Disbursement For:  Primary,  General,  Other (specify) ▼

State: District:

FEC Identification Number: C  
**Transaction ID : SB.52**  
Amount of Each Disbursement this Period: 105.85

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 5354.17

**TOTAL** 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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. DC Finance & Treasury**

Mailing Address 1101 4th Street, SW  
Suite 850W

City Washington State DC Zip Code 20024

Purpose of Disbursement  
State taxes withheld

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 / 01 / 2017

FEC Identification Number

C

**Transaction ID : SB.55**

Amount of Each Disbursement this Period

124.78

Memo Item

Full Name (Last, First, Middle Initial)

**B. DC Finance & Treasury**

Mailing Address 1101 4th Street, SW  
Suite 850W

City Washington State DC Zip Code 20024

Purpose of Disbursement  
State taxes

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 / 01 / 2017

FEC Identification Number

C

**Transaction ID : SB.56**

Amount of Each Disbursement this Period

65.25

Memo Item

Full Name (Last, First, Middle Initial)

**C. Internal Revenue Service**

Mailing Address P.O. Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement  
Federal taxes withheld

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 / 01 / 2017

FEC Identification Number

C

**Transaction ID : SB.50**

Amount of Each Disbursement this Period

1855.53

Memo Item

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

2045.56

**TOTAL** 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)  
**Congressional Leadership Fund**

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Federal taxes withheld

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.54

Amount of Each Disbursement this Period: 663.06

Memo Item

**B. VA Department of Taxation**

Full Name (Last, First, Middle Initial)

Mailing Address 1957 Westmoreland Street

City Richmond State VA Zip Code 23230

Purpose of Disbursement State taxes withheld

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 01 / 2017

FEC Identification Number: C

Transaction ID : SB.51

Amount of Each Disbursement this Period: 289.71

Memo Item

**C. PCI Payment Solutions**

Full Name (Last, First, Middle Initial)

Mailing Address 902 Chinquapin

City McLean State VA Zip Code 22102

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 02 / 2017

FEC Identification Number: C

Transaction ID : SB.5

Amount of Each Disbursement this Period: 46.25

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 999.02

**TOTAL** 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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)  
**A. Capitol Computer Exchange**

Date of Disbursement: MM / DD / YYYY  
03 / 03 / 2017

Mailing Address 4487 Forbes Boulevard

City Lanham State MD Zip Code 20706

Purpose of Disbursement Computer services  
Candidate Name

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

FEC Identification Number: C  
**Transaction ID : SB.37**  
Amount of Each Disbursement this Period: 95.18  
 Memo Item

Full Name (Last, First, Middle Initial)  
**B. E.C. Maruggi Incorporated**

Date of Disbursement: MM / DD / YYYY  
03 / 06 / 2017

Mailing Address 660 South Howell St.

City St. Paul State MN Zip Code 55116

Purpose of Disbursement Business consulting  
Candidate Name

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

FEC Identification Number: C  
**Transaction ID : SB.13**  
Amount of Each Disbursement this Period: 1000.00  
 Memo Item

Full Name (Last, First, Middle Initial)  
**C. CMDI**

Date of Disbursement: MM / DD / YYYY  
03 / 07 / 2017

Mailing Address 1593 Spring Hill Road Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement Merchant fees  
Candidate Name

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

FEC Identification Number: C  
**Transaction ID : SB.6**  
Amount of Each Disbursement this Period: 39.67  
 Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1134.85

**TOTAL** 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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Express**

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement  
Merchant fees

**003**  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 10 / 2017

FEC Identification Number  
**C**  
**Transaction ID : SB.7**  
Amount of Each Disbursement this Period  
7.95

Memo Item

Full Name (Last, First, Middle Initial)

**B. CMDI**

Mailing Address 1593 Spring Hill Road  
Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement  
Donor database subscription

**003**  
Category/  
Type

Candidate Name

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

Date of Disbursement  
MM / DD / YYYY  
03 / 13 / 2017

FEC Identification Number  
**C**  
**Transaction ID : SB.17**  
Amount of Each Disbursement this Period  
500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Trinity Financial Reporting & Compliance**

Mailing Address 13051 Farthingale Dr.

City Oak Hill State VA Zip Code 20171

Purpose of Disbursement  
Accounting and compliance

**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 / 13 / 2017

FEC Identification Number  
**C**  
**Transaction ID : SB.30**  
Amount of Each Disbursement this Period  
5737.50

Memo Item

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

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

6245.45

**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)  
**Congressional Leadership Fund**

**A. Wiley Rein LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement Legal services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 13 / 2017

FEC Identification Number: C

Transaction ID : SB.31

Amount of Each Disbursement this Period: 5566.25

Memo Item

**B. CMDI**

Full Name (Last, First, Middle Initial)

Mailing Address 1593 Spring Hill Road Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement Merchant fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 14 / 2017

FEC Identification Number: C

Transaction ID : SB.8

Amount of Each Disbursement this Period: 1.28

Memo Item

**C. Bliss, Corry, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 1747 Pennsylvania Ave. NW 5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement Travel - see memo entry

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 15 / 2017

FEC Identification Number: C

Transaction ID : SB.80

Amount of Each Disbursement this Period: 1182.92

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 6750.45

**TOTAL** 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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Edwards, Trent, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [ ] <b>Transaction ID : SB.86</b> Amount of Each Disbursement this Period [ ] 351.07
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Travel	Category/Type 002	
Candidate Name	Memo Item <input type="checkbox"/>	
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. Inman, William, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [ ] <b>Transaction ID : SB.82</b> Amount of Each Disbursement this Period [ ] 2681.16
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Travel - see memo entries	Category/Type 002	
Candidate Name	Memo Item <input type="checkbox"/>	
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. American Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 15 / 2017
Mailing Address 4333 Amon Carter Boulevard		FEC Identification Number C [ ] <b>Transaction ID : SB.83</b> Amount of Each Disbursement this Period [ ] 971.79
City Ft. Worth	State TX	Zip Code 76155
Purpose of Disbursement Airfare	Category/Type 002	
Candidate Name	Memo Item <input checked="" type="checkbox"/>	
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).....▶	[ ] 3032.23
<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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. The Breakers**

Mailing Address 1 S County Rd

City  
Palm Beach

State  
FL

Zip Code  
33480

Purpose of Disbursement  
Lodging

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : SB.85

Amount of Each Disbursement this Period

495.00

SB.82

Memo Item

Full Name (Last, First, Middle Initial)

**B. The Ritz Carlton**

Mailing Address 4445 Willard Avenue  
Suite 800

City  
Chevy Chase

State  
MD

Zip Code  
20815

Purpose of Disbursement  
Lodging

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : SB.81

Amount of Each Disbursement this Period

1182.92

SB.80

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Ritz Carlton**

Mailing Address 4445 Willard Avenue  
Suite 800

City  
Chevy Chase

State  
MD

Zip Code  
20815

Purpose of Disbursement  
Lodging

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	5		2	0	1	7

FEC Identification Number

C

Transaction ID : SB.84

Amount of Each Disbursement this Period

1199.42

SB.82

Memo Item

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

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

0.00

**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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Albertson, Evan, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.60</b> Amount of Each Disbursement this Period [REDACTED] 1634.30
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Payroll		Category/ Type 001
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Bader, Stephen, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.64</b> Amount of Each Disbursement this Period [REDACTED] 1233.35
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Payroll		Category/ Type 001
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Lee, Patrick, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.57</b> Amount of Each Disbursement this Period [REDACTED] 3614.02
City Washington	State DC	Zip Code 20006
Purpose of Disbursement Payroll		Category/ Type 001
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 6481.67
<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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. DC Finance &amp; Treasury</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address 1101 4th Street, SW Suite 850W		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.62</b> Amount of Each Disbursement this Period [REDACTED] 124.78
City Washington	State DC	Zip Code 20024
Purpose of Disbursement State taxes withheld		Category/ Type 001
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. DC Finance &amp; Treasury</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address 1101 4th Street, SW Suite 850W		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.63</b> Amount of Each Disbursement this Period [REDACTED] 65.25
City Washington	State DC	Zip Code 20024
Purpose of Disbursement State taxes		Category/ Type 001
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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Internal Revenue Service</b>		Date of Disbursement MM / DD / YYYY 03 / 16 / 2017
Mailing Address P.O. Box 804522		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.58</b> Amount of Each Disbursement this Period [REDACTED] 1855.55
City Cincinnati	State OH	Zip Code 45280
Purpose of Disbursement Federal taxes withheld		Category/ Type 001
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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 2045.58
<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)  
**Congressional Leadership Fund**

**A. Internal Revenue Service**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Federal taxes withheld

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB.61

Amount of Each Disbursement this Period: 663.04

Memo Item

**B. Internal Revenue Service**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 804522

City Cincinnati State OH Zip Code 45280

Purpose of Disbursement Federal taxes withheld

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB.65

Amount of Each Disbursement this Period: 425.69

Memo Item

**C. NE Department of Revenue**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 98912

City Lincoln State NE Zip Code 68509

Purpose of Disbursement State taxes withheld

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 16 / 2017

FEC Identification Number: C

Transaction ID : SB.66

Amount of Each Disbursement this Period: 63.36

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 1152.09

**TOTAL** 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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. NE Department of Revenue**

Mailing Address P.O. BOX 98912

City  
Lincoln

State  
NE

Zip Code  
68509

Purpose of Disbursement  
State taxes

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2017

FEC Identification Number

C

Transaction ID : SB.67

Amount of Each Disbursement this Period

20.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. VA Department of Taxation**

Mailing Address 1957 Westmoreland Street

City  
Richmond

State  
VA

Zip Code  
23230

Purpose of Disbursement  
State taxes withheld

001

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 16 / 2017

FEC Identification Number

C

Transaction ID : SB.59

Amount of Each Disbursement this Period

289.71

Memo Item

Full Name (Last, First, Middle Initial)

**C. Guerra, Ruth, , ,**

Mailing Address 1747 Pennsylvania Ave. NW  
5th Floor

City  
Washington

State  
DC

Zip Code  
20006

Purpose of Disbursement  
Travel - see memo entries

002

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
03 / 21 / 2017

FEC Identification Number

C

Transaction ID : SB.87

Amount of Each Disbursement this Period

907.16

Memo Item

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

1216.87

**TOTAL** 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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Lee, Patrick, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [ ] <b>Transaction ID : SB.39</b> Amount of Each Disbursement this Period [ ] 6881.08	
City Washington	State DC	Zip Code 20006	Category/ Type 002
Purpose of Disbursement Travel - see memo entries			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Lee, Patrick, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [ ] <b>Transaction ID : SB.42</b> Amount of Each Disbursement this Period [ ] 1166.84	
City Washington	State DC	Zip Code 20006	Category/ Type 002
Purpose of Disbursement Mileage reimbursement			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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. Aline Bae Tanning, Inc.</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 4202 Dodge St.		FEC Identification Number C [ ] <b>Transaction ID : SB.38</b> Amount of Each Disbursement this Period [ ] 230.00	
City Omaha	State NE	Zip Code 68131	Category/ Type 001
Purpose of Disbursement Office supplies			
Candidate Name		Memo Item <input type="checkbox"/>	
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).....▶	[ ] 7111.08
<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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. American Viewpoint, Inc.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	1			2	0	1	7	

Mailing Address 1199 North Lee Street  
Suite 808

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Political survey

C
005
Category/ Type

FEC Identification Number

C

**Transaction ID : SB.68**

Amount of Each Disbursement this Period

23100.00

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. American Viewpoint, Inc.**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	1			2	0	1	7	

Mailing Address 1199 North Lee Street  
Suite 808

City  
Alexandria

State  
VA

Zip Code  
22314

Purpose of Disbursement  
Political survey

C
005
Category/ Type

FEC Identification Number

C

**Transaction ID : SB.69**

Amount of Each Disbursement this Period

23100.00

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)

**C. CMDI**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3				2	1			2	0	1	7	

Mailing Address 1593 Spring Hill Road  
Suite 400

City  
Tysons Corner

State  
VA

Zip Code  
22182

Purpose of Disbursement  
Merchant fees

C
003
Category/ Type

FEC Identification Number

C

**Transaction ID : SB.9**

Amount of Each Disbursement this Period

4.20

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:

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

46204.20

**TOTAL** 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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

### A. CNA Insurance

Mailing Address P.O. Box 790094

City St. Louis State MO Zip Code 63179

Purpose of Disbursement Insurance premium

001

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM/DD/YYYY  
03 / 21 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.25

Amount of Each Disbursement this Period

[REDACTED] 1259.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Courtyard

Mailing Address 10400 Fernwood Road

City Bethesda State MD Zip Code 20817

Purpose of Disbursement Lodging

002

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM/DD/YYYY  
03 / 21 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.43

Amount of Each Disbursement this Period

[REDACTED] 117.60

SB.39

Memo Item

Full Name (Last, First, Middle Initial)

### C. Courtyard

Mailing Address 10400 Fernwood Road

City Bethesda State MD Zip Code 20817

Purpose of Disbursement Lodging

002

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

MM/DD/YYYY  
03 / 21 / 2017

FEC Identification Number

C [REDACTED]

Transaction ID : SB.88

Amount of Each Disbursement this Period

[REDACTED] 269.92

SB.87

Memo Item

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

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

[REDACTED] 1259.00

[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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Delta Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 1030 Delta Boulevard		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.89</b>	
City Atlanta	State GA	Zip Code 30354	Amount of Each Disbursement this Period [REDACTED] 413.90
Purpose of Disbursement Airfare	Candidate Name		Category/Type 002
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			SB.87

Full Name (Last, First, Middle Initial) <b>B. Go Daddy</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 14455 N Hayden Rd. Suite 219		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.40</b>	
City Scottsdale	State AZ	Zip Code 85260	Amount of Each Disbursement this Period [REDACTED] 304.64
Purpose of Disbursement Domain name registration	Candidate Name		Category/Type 001
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			SB.39

Full Name (Last, First, Middle Initial) <b>C. Residence Inn</b>		Date of Disbursement MM / DD / YYYY 03 / 21 / 2017	
Mailing Address 10400 Fernwood Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.41</b>	
City Bethesda	State MD	Zip Code 20817	Amount of Each Disbursement this Period [REDACTED] 4500.54
Purpose of Disbursement Lodging	Candidate Name		Category/Type 002
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) ▼		<input checked="" type="checkbox"/> Memo Item
State: District:			SB.39

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 0.00
<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)  
**Congressional Leadership Fund**

**A. Wiley Rein LLP**

Full Name (Last, First, Middle Initial)

Mailing Address 1776 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement Legal services

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 21 / 2017

FEC Identification Number: C

**Transaction ID : SB.32**

Amount of Each Disbursement this Period: 20077.50

Memo Item

**B. CB Richard Ellis MEGA**

Full Name (Last, First, Middle Initial)

Mailing Address 11213 Davenport Street, Suite 300

City Omaha State NE Zip Code 68154

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 24 / 2017

FEC Identification Number: C

**Transaction ID : SB.44**

Amount of Each Disbursement this Period: 3762.17

Memo Item

**C. Kraber, Bryan, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 15310 Boston Parkway Apt. 308

City Clive State IA Zip Code 50325

Purpose of Disbursement Business consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 03 / 27 / 2017

FEC Identification Number: C

**Transaction ID : SB.14**

Amount of Each Disbursement this Period: 3600.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 27439.67

**TOTAL** 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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Gillan, Zach, , ,</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017	
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.90</b> Amount of Each Disbursement this Period [REDACTED] 2087.53	
City Washington	State DC	Zip Code 02006	Category/ Type <b>002</b>
Purpose of Disbursement Travel - see memo entries			
Candidate Name		Memo Item <input type="checkbox"/>	
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. CMDI</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017	
Mailing Address 1593 Spring Hill Road Suite 400		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.10</b> Amount of Each Disbursement this Period [REDACTED] 215.10	
City Tysons Corner	State VA	Zip Code 22182	Category/ Type <b>003</b>
Purpose of Disbursement Merchant fees			
Candidate Name		Memo Item <input type="checkbox"/>	
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. Courtyard</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017	
Mailing Address 10400 Fernwood Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB.91</b> Amount of Each Disbursement this Period [REDACTED] 657.00 SB.90	
City Bethesda	State MD	Zip Code 20817	Category/ Type <b>002</b>
Purpose of Disbursement Lodging			
Candidate Name		Memo Item <input checked="" type="checkbox"/>	
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:			

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

[REDACTED] 2302.63

**TOTAL** 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)

**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Creative Direct LLC**

Mailing Address The Reagan Building  
25 E. Main St.

City Richmond State VA Zip Code 23219

Purpose of Disbursement Doorhangers

**004**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB.70**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Hertz**

Mailing Address 225 Brae Boulevard

City Park Ridge State NJ Zip Code 07656

Purpose of Disbursement Ground transportation

**002**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB.92**

Amount of Each Disbursement this Period

SB.90

Memo Item

Full Name (Last, First, Middle Initial)

**C. In Field Strategies**

Mailing Address 16192 Coastal Highway

City Lewes State DE Zip Code 19958

Purpose of Disbursement Pre-payment for future Independent Expenditure

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB.97**

Amount of Each Disbursement this Period

Memo Item

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

**TOTAL** 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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial) <b>A. Marriott</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017	
Mailing Address 10400 Fernwood Road		FEC Identification Number C [ ] <b>Transaction ID : SB.94</b>	
City Bethesda	State MD	Zip Code 20817	Amount of Each Disbursement this Period [ ] 299.68
Purpose of Disbursement Lodging		Category/ Type 002	Memo Item <input checked="" 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. September Group</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017	
Mailing Address 1712 Pioneer Ave. Suite 635		FEC Identification Number C [ ] <b>Transaction ID : SB.96</b>	
City Cheyenne	State WY	Zip Code 82001	Amount of Each Disbursement this Period [ ] 64400.00
Purpose of Disbursement Pre-payment for future Independent Expenditure		Category/ Type 004	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. Southwest Airlines</b>		Date of Disbursement MM / DD / YYYY 03 / 28 / 2017	
Mailing Address 2702 Love Field Dr.		FEC Identification Number C [ ] <b>Transaction ID : SB.93</b>	
City Ft. Worth	State TX	Zip Code 75235	Amount of Each Disbursement this Period [ ] 590.88
Purpose of Disbursement Airfare		Category/ Type 002	Memo Item <input checked="" 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).....▶	[ ] 64400.00
<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)  
**Congressional Leadership Fund**

Full Name (Last, First, Middle Initial)

**A. Advantage Direct Communications**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2017

Mailing Address 2300 Clarendon Blvd.  
Suite 303

City Arlington State VA Zip Code 22201

Purpose of Disbursement  
Software license

C	001
Category/Type	

FEC Identification Number

C
---

Transaction ID : SB.71

Amount of Each Disbursement this Period

350.00
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Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. American Action Network**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2017

Mailing Address 1747 Pennsylvania Ave. NW  
5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement  
In-kind: Payroll/office space

C	
Category/Type	

FEC Identification Number

C
---

Transaction ID : SB.100

Amount of Each Disbursement this Period

92631.00
----------

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
	/		/	

Mailing Address

City State Zip Code

Purpose of Disbursement

C	
Category/Type	

FEC Identification Number

C
---

Amount of Each Disbursement this Period

--

Memo Item

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

92981.00
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**TOTAL** This Period (last page this line number only)..... ▶

506481.20
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**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 1.5em; font-weight: bold; border: 1px solid black; display: inline-block; width: 20px; height: 20px; text-align: center; vertical-align: middle;">C</span> <span style="margin-left: 5px;">C00504530</span> </div>
---------------------------------------------------------------------	---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

Check if  24-hour report     48-hour report     New report    Amends report filed on   /  /  

Full Name of Payee <input type="checkbox"/> Memo Item <b>Strategic Media Services</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">03 / 03 / 2017</span>
Mailing Address 1911 North Ft. Myer Drive Suite 400	Amount <span style="border: 1px solid black; padding: 2px;">1098528.10</span>
City State Zip Code Arlington VA 22209	
Purpose of Expenditure Media placement and production    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Ossoff, Jon, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate    District: 06 State: GA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">1098528.10</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General

Full Name of Payee <input type="checkbox"/> Memo Item <b>Strategic Media Services</b>	Date of Public Distribution/Dissemination <span style="border: 1px solid black; padding: 2px;">03 / 24 / 2017</span>
Mailing Address 1911 North Ft. Myer Drive Suite 400	Amount <span style="border: 1px solid black; padding: 2px;">1124555.00</span>
City State Zip Code Arlington VA 22209	
Purpose of Expenditure Media placement and production    Category/Type <span style="border: 1px solid black; padding: 2px;">004</span>	
Name of Federal Candidate: Ossoff, Jon, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate    District: 06 State: GA
Calendar Year-To-Date Per Election for Office Sought <span style="border: 1px solid black; padding: 2px;">2223083.10</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▶ Special General

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;">2223083.10</span>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<span style="border: 1px solid black; padding: 2px;"> </span>

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, , ,

*[Electronically Filed]*

Date

04 / 06 / 2017

Signature

**SCHEDULE E (FEC Form 3X)  
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px;"> <span style="font-size: 24px; font-weight: bold; margin-right: 5px;">C</span> C00504530                 </div>
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Check if  24-hour report  48-hour report ▶  New report  Amends report filed on M M / D D / Y Y Y Y Y Y

Full Name of Payee <input type="checkbox"/> Memo Item <b>Majority Strategies</b>	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 03 / 27 / 2017
Mailing Address 12854 Kenan Drive Suite 145	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">32322.02</div> Transaction ID : 003 Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 03 / 27 / 2017
City Jacksonville State FL Zip Code 32258	
Purpose of Expenditure Direct mail Category/Type 004	
Name of Federal Candidate: Ossoff, Jon, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 06 <input type="checkbox"/> President <input type="checkbox"/> Senate State: GA
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">2255405.12</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2017 <input checked="" type="checkbox"/> Other (specify) ▶ Special General

Full Name of Payee <input type="checkbox"/> Memo Item <b>Mentzer Media Services</b>	Date of Public Distribution/Dissemination <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 03 / 07 / 2017
Mailing Address 210 W. Pennsylvania Ave. Suite 250	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">700050.00</div> Transaction ID : 004 Date of Disbursement or Obligation <span style="font-size: 24px; font-weight: bold;">M M / D D / Y Y Y Y Y Y</span> 03 / 06 / 2017
City Towson State MD Zip Code 21204	
Purpose of Expenditure Media placement and production Category/Type 004	
Name of Federal Candidate: Quist, Rob, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MT
Calendar Year-To-Date Per Election for Office Sought <span style="float: right;">700050.00</span>	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General 2017 <input checked="" type="checkbox"/> Other (specify) ▶ Special General

<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">732372.02</div>
<b>(a) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
<b>(a) TOTAL</b> Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">2955455.12</div>

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, , ,

*[Electronically Filed]*

Date

M M / D D / Y Y Y Y Y Y  
04 / 06 / 2017

Signature