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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if X 24-hour report 48-hour report New report Amends report filed of	n M = M / D = D / Y = Y = Y = Y
Full Name of Payee Creative Direct	Date of Public Distribution/Dissemination
	10 26 2018
Mailing Address 25 E. Main St.	Amount
City State Zip Code	18258.00
	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail  Category/ Type 004	10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Office s	Sought: X House District: 07
Malinowski, Tom, , ,	President Senate State: NJ
Calendar Year-To-Date Per Election for Office Sought  Disburs 2018	sement For: Primary <b>X</b> General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Purpose of Expenditure Cotogony/	Date of Disbursement or Obligation
Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support Office	Sought: House District:
Oppose p	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	sement For: Primary General
Tel Election for Office Sought	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	18258.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	18258.00
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Crosby, Caleb, , ,  [Electronically Filed] Date 10	M / D D / Y Y Y Y Y Z Y Z 2018
Signature	