

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
Washington DC 20006
 Check if different than previously reported. (ACC)

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 M M / D D / Y Y Y Y Y Y in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 / 08 / 2016 in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y through M M / D D / Y Y Y Y Y Y
10 / 20 / 2016 through 11 / 28 / 2016

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 05 / 17 / 2017

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**

FEC Form 3X (Rev. 05/2016)

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="2016"/>	<input type="text"/>	<input type="text" value="865793.42"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15265255.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7446087.10"/>	<input type="text" value="50214753.62"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="22711342.55"/>	<input type="text" value="51080547.04"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20663433.82"/>	<input type="text" value="49032638.31"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2047908.73"/>	<input type="text" value="2047908.73"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Congressional Leadership Fund

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 20 / 2016 To: M M / D D / Y Y Y Y 11 / 28 / 2016

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).....	7096577.00	49768797.15
(ii) Unitemized	1010.10	1520.10
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	7097587.10	49770317.25
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	348500.00	443500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	7446087.10	50213817.25
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).....	0.00	936.37
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)).....▶	7446087.10	50214753.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	7446087.10	50214753.62

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	875041.42	6911882.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	875041.42	6911882.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	1995000.00
24. Independent Expenditures (use Schedule E)	19788392.40	40125756.02
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)) ..	20663433.82	49032638.31
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20663433.82	49032638.31

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7446087.10	50213817.25
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7446087.10	50213817.25
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	875041.42	6911882.29
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	936.37
38. Net Operating Expenditures (subtract Line 37 from Line 36)	875041.42	6910945.92

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

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

FOR LINE NUMBER: PAGE 6 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 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. CHANDI, NACHHATTAR, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 42270 SPECTRUM ST.
 City INDIO State CA Zip Code 92203-9513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CHANDI GROUP USA Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1366
 Amount of Each Receipt this Period 150000.00
 Memo Item
 CONTRIBUTION

B. CONARD, EDWARD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 77 WATER ST FLOOR 9
 City NEW YORK State NY Zip Code 10005-4414
 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 ▼ 100000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1365
 Amount of Each Receipt this Period 100000.00
 Memo Item
 CONTRIBUTION

C. 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) BLUFF POINT ASSOCIATES Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 350000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1360
 Amount of Each Receipt this Period 100000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 350000.00
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 7 OF 146
	<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. PURCELL, PHILLIP, J., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6300 N. SAGEWOOD DR.
 SUITE H-110
 City PARK CITY State UT Zip Code 84098-7502
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CONTINENTAL INVESTORS LLC Occupation (for Individual) PRESIDENT
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 108900.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1364
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. REYES, J., CHRISTOPHER, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 S. FLAGLER DR.
 SUITE 1500
 City WEST PALM BEACH State FL Zip Code 33401-6157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REYES HOLDINGS, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1362
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

C. REYES, M., JUDE, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 S FLAGLER DRIVE
 SUITE 1500
 City WEST PALM BEACH State FL Zip Code 33401-6157
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) REYES HOLDINGS, LLC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1361
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550000.00
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 146
	<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. SINGER, PAUL, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 W 57TH ST
 30TH FLOOR
 City NEW YORK State NY Zip Code 10019-4001
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ELLIOTT MANAGEMENT CORP. Occupation (for Individual) PRINCIPAL
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1900000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1359
 Amount of Each Receipt this Period 400000.00
 Memo Item
 CONTRIBUTION

B. SPITALETTA, RICHARD, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 343 SOUTH RIVER STREET
 City HACKENSACK State NJ Zip Code 07601-6838
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HILLCREST SALES Occupation (for Individual) BROKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1287
 Amount of Each Receipt this Period 250.00
 Memo Item
 CONTRIBUTION

C. HARLAN R. CROW FAMILY BRANCH PARTNERSHIP LP
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2100 MCKINNEY AVE
 SUITE 700
 City DALLAS State TX Zip Code 75201-6909
 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 ▼ 559000.00

Date of Receipt 10 / 20 / 2016
Transaction ID : SA11A.1363
 Amount of Each Receipt this Period 359000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	759250.00
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: PAGE 9 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. CURRY, RAVENEL, B., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 435 EAST 52ND STREET
APT 4C

City NEW YORK State NY Zip Code 10022-

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

Name of Employer (for Individual) EAGLE CAPITAL MANAGEMENT Occupation (for Individual) CHIEF INVESTMENT OFFICER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.1376

Amount of Each Receipt this Period 50000.00

Memo Item CONTRIBUTION

B. LUCZO, STEPHEN, J., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 277

City LOS GATOS State CA Zip Code 95031-

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

Name of Employer (for Individual) SEAGATE TECHNOLOGY Occupation (for Individual) CHAIRMAN AND CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.1373

Amount of Each Receipt this Period 100000.00

Memo Item CONTRIBUTION

C. MARION, ANNE, W., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 801 CHERRY ST. UNIT 9

City FORT WORTH State TX Zip Code 76102-

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

Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) OIL GAS INVESTMENTS, RANCHING

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.1368

Amount of Each Receipt this Period 100000.00

Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 250000.00

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: PAGE 10 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. MCLANE, DRAYTON, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4001 CENTRAL POINTE PARKWAY
 City TEMPLE State TX Zip Code 76504-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MCLANE GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.1374
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. ROBERTSON, JULIAN, H., , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 101 PARK AVENUE
 City NEW YORK State NY Zip Code 10178-0002
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TIGER MANAGEMENT LLC Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1100000.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.1370
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. TAMKIN, CURTIS, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1262 LAGO VISTA PLACE
 City BEVERLY HILLS State CA Zip Code 90210-2416
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) COMERICA BANK Occupation (for Individual) VICE PRESIDENT
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2700.00

Date of Receipt 10 / 21 / 2016
Transaction ID : SA11A.1291
 Amount of Each Receipt this Period 2700.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► 152700.00
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 11 OF 146
	<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. COPART

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

Mailing Address 4610 WEST AMERICA DRIVE

City FAIRFIELD	State CA	Zip Code 94534-
-------------------	-------------	--------------------

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
10		21		2016

Transaction ID : SA11A.1371

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

B. FIELDWOOD ENERGY LLC

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

Mailing Address 2000 W. SAM HOUSTON S
SUITE 1200

City HOUSTON	State TX	Zip Code 77042-
-----------------	-------------	--------------------

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 ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.1372

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

C. THE LOOSE GROUP

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

Mailing Address 3379 PEACHTREE RD. NE
SUITE 270

City ATLANTA	State GA	Zip Code 30326-
-----------------	-------------	--------------------

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 ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11A.1375

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	80000.00
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 12 OF 146
	<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. LEITOLD, WILLIAM, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 536 WEST 43RD STREET APT 1F
 City NEW YORK State NY Zip Code 10036-4341
 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 10 / 22 / 2016
Transaction ID : SA11A.1292
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

B. FORBES, TIMOTHY, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 845 E. MIDDLE MEADOW ROAD
 City MOOSE State WY Zip Code 83012-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HIGHLANDER MANAGEMENT INC Occupation (for Individual) EXECUTIVE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 10 / 23 / 2016
Transaction ID : SA11A.1293
 Amount of Each Receipt this Period 5000.00
 Memo Item CONTRIBUTION

C. COHEN, STEVEN, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 30 CROWN LN
 City GREENWICH State CT Zip Code 06831-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) POINT 72 ASSET MANAGEMENT Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.1377
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	255250.00
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 13 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. OVERDECK, JOHN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 80
 City NEW YORK State NY Zip Code 10012-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TWO SIGMA INVESTMENTS Occupation (for Individual) CO-CHAIRMAN
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.1381
 Amount of Each Receipt this Period 250000.00
 Memo Item
CONTRIBUTION

B. WARE, MARILYN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 210 UNIVERSITY BLVD. SUITE 410
 City DENVER State CO Zip Code 80206-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) US AMBASSADOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 150000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.1379
 Amount of Each Receipt this Period 150000.00
 Memo Item
CONTRIBUTION

C. 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 15222-3715
 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 ▼ 150000.00

Date of Receipt 10 / 24 / 2016
Transaction ID : SA11A.1378
 Amount of Each Receipt this Period 150000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	550000.00
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 14 OF 146
	<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. OCCIDENTAL PETROLEUM CORPORATION
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2647

City HOUSTON	State TX	Zip Code 77252-
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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 ▼
175000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2016

Transaction ID : SA11A.1380

Amount of Each Receipt this Period
150000.00

Memo Item
CONTRIBUTION

B. BUSCH, AUGUST, A., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MID RIVERS MALL DR.

City ST. PETERS	State MO	Zip Code 63376-4320
--------------------	-------------	------------------------

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 ▼
340000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		25		2016

Transaction ID : SA11A.1383

Amount of Each Receipt this Period
40000.00

Memo Item
CONTRIBUTION

C. FISHER, CYNTHIA, A., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 186 PARK ST

City NEWTON	State MA	Zip Code 02458-2044
----------------	-------------	------------------------

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

Name of Employer (for Individual) WATER REV, LLC	Occupation (for Individual) MANAGING DIRECTOR
---	--

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
10		25		2016

Transaction ID : SA11A.1384

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	215000.00
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 15 OF 146
	<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. GUND, GORDON, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14 NASSAU ST.
 City PRINCETON State NJ Zip Code 08542-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) GUND INVESTMENT GROUP Occupation (for Individual) CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 203000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.1385
 Amount of Each Receipt this Period 203000.00
 Memo Item
CONTRIBUTION

B. PENNINGTON, ROBERT, V., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 RED COAT PASS
 City DARIEN State CT Zip Code 06820-
 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 ▼ 50000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.1386
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

C. RYAN, PATRICK, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 150 N. MICHIGAN AVE. SUITE 2100
 City CHICAGO State IL Zip Code 60601-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RYAN SPECIALTY GROUP Occupation (for Individual) CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 25 / 2016
Transaction ID : SA11A.1382
 Amount of Each Receipt this Period 100000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	353000.00
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 16 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. BOYCE, RICHARD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 437 WHISKEY HILL RD.
 City WOODSIDE State CA Zip Code 94062-
 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 ▼ 100000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.1389
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. GROFF, SUSAN, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9832 CALVIN AVENUE
 City NORTHRIDGE State CA Zip Code 91324-1619
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) NORTHWEST EXCAVATING INC. Occupation (for Individual) CONTRACTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 175000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.1388
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. SCHWAB, CHARLES, R., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 192861
 City SAN FRANCISCO State CA Zip Code 94119-2861
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) THE CHARLES SCHWAB CORPORATION Occupation (for Individual) EXECUTIVE CHAIRMAN
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250000.00

Date of Receipt 10 / 26 / 2016
Transaction ID : SA11A.1387
 Amount of Each Receipt this Period 250000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	325000.00
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 17 OF 146
	<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. BOYCE, RICHARD, W., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 437 WHISKEY HILL RD.
 City WOODSIDE State CA Zip Code 94062-
 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 ▼ 100000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.1390
 Amount of Each Receipt this Period 50000.00
 Memo Item CONTRIBUTION

B. EDGERLEY, PAUL, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 119 HYSLOP ROAD
 City BROOKLINE State MA Zip Code 02445-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF-EMPLOYED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 100000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.1391
 Amount of Each Receipt this Period 100000.00
 Memo Item CONTRIBUTION

C. LONG, GEORGE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 680 LAKE DRIVE
 City VERO BEACH State FL Zip Code 32963-2165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) RETIRED Occupation (for Individual) INVESTOR
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.1333
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	150250.00
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 18 OF 146
	<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. WENDT, GREG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1 MARKET ST
 City SAN FRANCISCO State CA Zip Code 94105-1402
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CAPITAL GROUP Occupation (for Individual) FINANCE
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 10 / 27 / 2016
Transaction ID : SA11A.1331
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

B. BENGARD, BARDIN, E., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 80090
 City SALINAS State CA Zip Code 93912-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) BENGARD RANCH Occupation (for Individual) FARMER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.1396
 Amount of Each Receipt this Period 2000.00
 Memo Item CONTRIBUTION

C. JOHNSON, CHARLES, B., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1220 S. OCEAN BLVD
 City PALM BEACH State FL Zip Code 33480-5016
 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 ▼ 300000.00

Date of Receipt 10 / 28 / 2016
Transaction ID : SA11A.1393
 Amount of Each Receipt this Period 200000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	212000.00
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 19 OF 146
	<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. MORONGO BAND OF MISSION INDIANS

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

Mailing Address 12700 PUMARRA RD.

City BANNING	State CA	Zip Code 92220-
-----------------	-------------	--------------------

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

Name of Employer (for Individual)	Occupation (for Individual)
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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
10		28		2016

Transaction ID : SA11A.1394

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

B. YOCHA DEHE WINTUN NATION

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

Mailing Address P.O. BOX 18

City BROOKS	State CA	Zip Code 95606-
----------------	-------------	--------------------

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
10		28		2016

Transaction ID : SA11A.1395

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

C. GEDULD, BUZZY, , ,

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

Mailing Address 279 CENTRAL PARK WEST

City NEW YORK	State NY	Zip Code 10024-
------------------	-------------	--------------------

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

Name of Employer (for Individual) COUGAR CAPITAL	Occupation (for Individual) INVESTMENTS
---	--

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
10		31		2016

Transaction ID : SA11A.1401

Amount of Each Receipt this Period
500.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	125500.00
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: PAGE 20 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. SAN MANUEL BAND OF MISSION INDIANS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 26569 COMMUNITY CENTER DR
 City HIGHLAND State CA Zip Code 92346-6712
 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 10 / 31 / 2016
Transaction ID : SA11A.1397
 Amount of Each Receipt this Period 100000.00
 Memo Item
CONTRIBUTION

B. SANTA YNEZ BAND OF MISSION INDIANS
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 517
 City SANTA YNEZ State CA Zip Code 93460-0517
 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 10 / 31 / 2016
Transaction ID : SA11A.1398
 Amount of Each Receipt this Period 25000.00
 Memo Item
CONTRIBUTION

C. SELECT MEDICAL CORPORATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4714 GETTYSBURG RD
 City MECHANICSBURG State PA Zip Code 17055-4325
 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 10 / 31 / 2016
Transaction ID : SA11A.1399
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 175000.00
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 21 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. CHAZEN, STEPHEN, I., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address PO BOX 1229
 City BELLAIRE State TX Zip Code 77402-1229
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) OCCIDENTAL PETROLEUM CORPORATION Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 125000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.1403
 Amount of Each Receipt this Period 75000.00
 Memo Item CONTRIBUTION

B. LARKIN, THOMAS, , , JR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address P.O. BOX 19751 SUITE 1800
 City IRVINE State CA Zip Code 92623-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) TCW GROUP, INC. Occupation (for Individual) DIRECTOR
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 25000.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.1402
 Amount of Each Receipt this Period 25000.00
 Memo Item CONTRIBUTION

C. MCCAW, CRAIG, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3410 CARILLON PT.
 City KIRKLAND State WA Zip Code 98033-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) EAGLE RIVER INVESTMENTS LLC Occupation (for Individual) CHAIRMAN & CEO
 Receipt For: Primary General Other (specify) ▼ Aggregate Year-to-Date ▼ 137400.00

Date of Receipt 11 / 01 / 2016
Transaction ID : SA11A.1406
 Amount of Each Receipt this Period 137400.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	237400.00
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 22 OF 146
	<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. SPANOS, ALEX, G., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 10100 TRINITY PARKWAY
 5TH FLOOR
 City STOCKTON State CA Zip Code 95219-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 A.G. SPANOS COMPANIES FOUNDER
 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
 11 / 01 / 2016
Transaction ID : SA11A.1405
 Amount of Each Receipt this Period
 25000.00
 Memo Item
 CONTRIBUTION

B. UESUGI FARMS, INC.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1020 STATE HWY 25
 City GILROY State CA Zip Code 95020-
 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
 M M M / D D D / Y Y Y Y Y Y
 11 / 01 / 2016
Transaction ID : SA11A.1407
 Amount of Each Receipt this Period
 1000.00
 Memo Item
 CONTRIBUTION

C. DAY, ROBERT, A., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 865 SOUTH FIGUEROA STREET
 SUITE 1800
 City LOS ANGELES State CA Zip Code 90017-2593
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 TRUST COMPANY OF THE WEST INVESTOR
 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
 11 / 02 / 2016
Transaction ID : SA11A.1409
 Amount of Each Receipt this Period
 100000.00
 Memo Item
 CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	126000.00
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 23 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. SIMMONS, ANNETTE, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5915 DELOACHE
 City DALLAS State TX Zip Code 75225-3006
 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 ▼ 1025000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.1410
 Amount of Each Receipt this Period 1000000.00
 Memo Item CONTRIBUTION

B. 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-
 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 ▼ 1300000.00

Date of Receipt 11 / 02 / 2016
Transaction ID : SA11A.1408
 Amount of Each Receipt this Period 300000.00
 Memo Item CONTRIBUTION

C. WONDERFUL ORCHARDS LLC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6801 E. LERDO HWY.
 City SHAFTER State CA Zip Code 93263-
 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 11 / 02 / 2016
Transaction ID : SA11A.1411
 Amount of Each Receipt this Period 10000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	1310000.00
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 24 OF 146
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. MCNAIR, ROBERT, C., , SR.
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address NRG STADIUM
 TWO NRG PARK
 City HOUSTON State TX Zip Code 77054-1573
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HOUSTON TEXANS Occupation (for Individual) CHAIRMAN AND CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1600000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.1417
 Amount of Each Receipt this Period 500000.00
 Memo Item CONTRIBUTION

B. PUTMAN, JOSEPH, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 16901 UPPER WOODS COVE
 City AUSTIN State TX Zip Code 78734-1041
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) SELF Occupation (for Individual) MARKETING BUSINESS OWNER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.1349
 Amount of Each Receipt this Period 250.00
 Memo Item CONTRIBUTION

C. AIRLINES FOR AMERICA
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1275 PENNSYLVANIA AVE NW
 SUITE 1300
 City WASHINGTON State DC Zip Code 20004-2450
 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 ▼ 215000.00

Date of Receipt 11 / 03 / 2016
Transaction ID : SA11A.1413
 Amount of Each Receipt this Period 15000.00
 Memo Item CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	515250.00
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: PAGE 25 OF 146
(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. APOLLO EDUCATION GROUP, INC.

Mailing Address 4025 S RIVERPOINT PKWY

City PHOENIX State AZ Zip Code 85040-0723

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
 11 / 03 / 2016

Transaction ID : SA11A.1412

Amount of Each Receipt this Period
 50000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B. FARMERS GROUP, INC.

Mailing Address 6301 OWENSMOUTH AVE.

City WOODLAND HILLS State CA Zip Code 91367-2216

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 ▼
 125000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016

Transaction ID : SA11A.1416

Amount of Each Receipt this Period
 25000.00

Memo Item
CONTRIBUTION

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C. OCCIDENTAL PETROLEUM CORPORATION

Mailing Address P.O. BOX 2647

City HOUSTON State TX Zip Code 77252-

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 ▼
 175000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 03 / 2016

Transaction ID : SA11A.1414

Amount of Each Receipt this Period
 25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 100000.00

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: PAGE 26 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. SYCUAN BAND OF THE KUMEYAA Y NATION
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2 KWAAYPAAY COURT
 City EL CAJON State CA Zip Code 92019-
 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 11 / 03 / 2016
Transaction ID : SA11A.1418
 Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

B. SILVERMAN, JEFFREY, L., ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1445 16TH ST. APT. 1102
 City MIAMI BEACH State FL Zip Code 33139-
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 SELF-EMPLOYED INVESTOR
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 11 / 04 / 2016
Transaction ID : SA11A.1420
 Amount of Each Receipt this Period 50000.00
 Memo Item
CONTRIBUTION

C. SHAKOPEE MDEWAKANTON SIOUX COMMUNITY
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 SIOUX TRAIL NW
 City PRIOR LAKE State MN Zip Code 55372-
 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 11 / 04 / 2016
Transaction ID : SA11A.1419
 Amount of Each Receipt this Period 10000.00
 Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70000.00
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 27 OF 146
	<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. HAYDE, MICHAEL, K., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 8 EXECUTIVE CIRCLE

City IRVINE	State CA	Zip Code 92614-6746
----------------	-------------	------------------------

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

Name of Employer (for Individual) WESTERN NATIONAL GROUP	Occupation (for Individual) EXECUTIVE
---	--

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
11		07		2016

Transaction ID : SA11A.1421

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

B. ASSOCIATED FEED & SUPPLY CO.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address P.O. BOX 2367

City TURLOCK	State CA	Zip Code 95381-
-----------------	-------------	--------------------

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
11		07		2016

Transaction ID : SA11A.1422

Amount of Each Receipt this Period
50000.00

Memo Item
CONTRIBUTION

C. CHENEY, RICHARD, B., ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4205 GREENS PLACE

City WILSON	State WY	Zip Code 83014-
----------------	-------------	--------------------

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 ▼
25000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11		08		2016

Transaction ID : SA11A.1424

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	100000.00
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 28 OF 146
	<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. BUSCH, AUGUST, A., , III
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1 MID RIVERS MALL DR.

City ST. PETERS State MO Zip Code 63376-4320

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 ▼ 340000.00

Date of Receipt 11 / 14 / 2016
Transaction ID : SA11A.1425

Amount of Each Receipt this Period 10000.00

Memo Item CONTRIBUTION

B. 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

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 ▼ 320405.15

Date of Receipt 11 / 28 / 2016
Transaction ID : SA11A.1426

Amount of Each Receipt this Period 124977.00

Memo Item CONTRIBUTION IN-KIND: PAYROLL/OFFICE SPACE/RESEARCH

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	134977.00
TOTAL This Period (last page this line number only).....	7096577.00

**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 29 OF 146
<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. NEVER MEANS NEVER PAC

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

Mailing Address P. O. BOX 320834

City ALEXANDRIA	State VA	Zip Code 22320-4834
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00610907

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2016

Transaction ID : SA11C.1367

Amount of Each Receipt this Period
15000.00

Memo Item
CONTRIBUTION

B. AMERICAN SOCIETY OF ANESTHESIOLOGISTS PAC

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

Mailing Address 1061 AMERICAN LANE

City SCHAUMBURG	State IL	Zip Code 60173-4973
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00255752

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		21		2016

Transaction ID : SA11C.1369

Amount of Each Receipt this Period
200000.00

Memo Item
CONTRIBUTION

C. FARM PAC

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

Mailing Address 2300 RIVER PLAZA DRIVE

City SACRAMENTO	State CA	Zip Code 95833-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00041954

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
10		27		2016

Transaction ID : SA11C.1392

Amount of Each Receipt this Period
25000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	240000.00
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 30 OF 146
<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. BLUE DIAMOND GROWERS PAC

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

Mailing Address 1802 C STREET

City SACRAMENTO	State CA	Zip Code 95811-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00080135

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10		31		2016

Transaction ID : SA11C.1400

Amount of Each Receipt this Period
5000.00

Memo Item
CONTRIBUTION

B. UA POLITICAL EDUCATION COMMITTEE

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

Mailing Address THREE PARK PLACE

City ANNAPOLIS	State MD	Zip Code 21401-
-------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00012476

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
11		01		2016

Transaction ID : SA11A.1404

Amount of Each Receipt this Period
100000.00

Memo Item
CONTRIBUTION

C. SMITHFIELD FOODS, INC. PAC

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

Mailing Address 200 COMMERCE STREET

City SMITHFIELD	State VA	Zip Code 23430-
--------------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00359075

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

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
11		03		2016

Transaction ID : SA11C.1415

Amount of Each Receipt this Period
1000.00

Memo Item
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	106000.00
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: PAGE 31 OF 146
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. SUNKIST GROWERS INC. PAC
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 14130 RIVERSIDE DR.
 City SHERMAN OAKS State CA Zip Code 91413-
 FEC ID number of contributing federal political committee. **C** C00099002
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 07 / 2016
Transaction ID : SA11C.1423
 Amount of Each Receipt this Period
 2500.00
 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
 M M / D D / Y Y Y Y Y Y
 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
 M M / D D / Y Y Y Y Y Y
 Amount of Each Receipt this Period
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	2500.00
TOTAL This Period (last page this line number only).....▶	348500.00

**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) A. Newton Heath LLC		Date of Disbursement MM / DD / YYYY 10 / 20 / 2016	
Mailing Address P.O. Box 581		FEC Identification Number C [REDACTED] Transaction ID : SB.30 Amount of Each Disbursement this Period 18890.00	
City Alexandria	State VA	Zip Code 22313	Category/ Type 005
Purpose of Disbursement Survey			
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. Newton Heath LLC		Date of Disbursement MM / DD / YYYY 10 / 20 / 2016	
Mailing Address P.O. Box 581		FEC Identification Number C [REDACTED] Transaction ID : SB.31 Amount of Each Disbursement this Period 19372.00	
City Alexandria	State VA	Zip Code 22313	Category/ Type 005
Purpose of Disbursement Survey			
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) C. American Media & Advocacy Group		Date of Disbursement MM / DD / YYYY 10 / 21 / 2016	
Mailing Address 815 Slaters Lane		FEC Identification Number C [REDACTED] Transaction ID : SB.70 Amount of Each Disbursement this Period -1073876.16 Independent expenditure previously reported as operating expenditure	
City Alexandria	State VA	Zip Code 22314	Category/ Type 004
Purpose of Disbursement Media placement			
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	-1035614.16
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. North Star Opinion Research, Inc.

Mailing Address 112 North Alfred Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Survey

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.32

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Push Digital

Mailing Address PO Box 7431

City Columbia State SC Zip Code 29202

Purpose of Disbursement Media placement

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.69

Amount of Each Disbursement this Period

Memo Item Independent expenditure previously reported as operating expenditure

Full Name (Last, First, Middle Initial)

C. Red Elephant Strategy LLC

Mailing Address 2205 Main Line Blvd

City Alexandria State VA Zip Code 22301

Purpose of Disbursement Strategy consulting

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.9

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)
A. Targeted Victory

Date of Disbursement: 10 / 22 / 2016

Mailing Address: 1033 North Fairfax Street, Suite 400
City: Alexandria, State: VA, Zip Code: 22314

Purpose of Disbursement: Media placement
Candidate Name: _____
Category/Type: 004

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

FEC Identification Number: C
Transaction ID : SB.66
Amount of Each Disbursement this Period: -54100.00
 Memo Item reported as operating expenditure

Full Name (Last, First, Middle Initial)
B. American Viewpoint, Inc.

Date of Disbursement: 10 / 24 / 2016

Mailing Address: 1199 North Lee Street, Suite 808
City: Alexandria, State: VA, Zip Code: 22314

Purpose of Disbursement: Survey
Candidate Name: _____
Category/Type: 005

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

FEC Identification Number: C
Transaction ID : SB.35
Amount of Each Disbursement this Period: 16800.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. North Star Opinion Research, Inc.

Date of Disbursement: 10 / 24 / 2016

Mailing Address: 112 North Alfred Street
City: Alexandria, State: VA, Zip Code: 22314

Purpose of Disbursement: Survey
Candidate Name: _____
Category/Type: 005

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

FEC Identification Number: C
Transaction ID : SB.33
Amount of Each Disbursement this Period: 25000.00
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ► -12300.00

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

Full Name (Last, First, Middle Initial)

A. The Tarrance Group

Mailing Address 201 N. Union St.
Suite 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Survey

005
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 Y Y
10 / 24 / 2016

FEC Identification Number

C
Transaction ID : SB.34
Amount of Each Disbursement this Period
23339.00

Memo Item

Full Name (Last, First, Middle Initial)

B. American Media & Advocacy Group

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Media placement

004
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 Y Y
10 / 25 / 2016

FEC Identification Number

C
Transaction ID : SB.67
Amount of Each Disbursement this Period
-332505.86
Independent expenditure previously reported as operating expenditure

Memo Item

Full Name (Last, First, Middle Initial)

C. American Media & Advocacy Group

Mailing Address 815 Slaters Lane

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Media placement

004
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 Y Y
10 / 25 / 2016

FEC Identification Number

C
Transaction ID : SB.71
Amount of Each Disbursement this Period
-1165688.56
Independent expenditure previously reported as operating expenditure

Memo Item

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

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

-1474855.42

**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. Basswood Research

Mailing Address 4550 Montgomery Ave.
Suite 906

City Bethesda State MD Zip Code 20814

Purpose of Disbursement
Survey

005
Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB.39
Amount of Each Disbursement this Period
13600.00

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
Merchant fee

003
Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB.1
Amount of Each Disbursement this Period
183.73

Memo Item

Full Name (Last, First, Middle Initial)

C. Cold Spark Media

Mailing Address 307 Fourth Ave.
Suite 920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement
Direct mail

004
Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB.65
Amount of Each Disbursement this Period
-18308.56
Independent expenditure previously reported as operating expenditure

Memo Item

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

-4524.83

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. DT Client Services LLC

Mailing Address 1101 14th Street NW
Suite 650

City Washington State DC Zip Code 20005

Purpose of Disbursement
Media optimization

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.25
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Public Opinion Strategies LLC

Mailing Address 214 N. Fayette Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Survey

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.38
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. The Tarrance Group

Mailing Address 201 N. Union St.
Suite 410

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Survey

Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : SB.37
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

A. Wilson Perkins Allen

Full Name (Last, First, Middle Initial)

Mailing Address 1319 Classen Drive

City Oklahoma City State OK Zip Code 73103

Purpose of Disbursement Survey

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 25 / 2016

FEC Identification Number: C

Transaction ID : SB.36

Amount of Each Disbursement this Period: 15000.00

Memo Item

B. Cold Spark Media

Full Name (Last, First, Middle Initial)

Mailing Address 307 Fourth Ave. Suite 920

City Pittsburgh State PA Zip Code 15222

Purpose of Disbursement Direct mail

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 10 / 26 / 2016

FEC Identification Number: C

Transaction ID : SB.73

Amount of Each Disbursement this Period: -17498.56

Independent expenditure previously reported as operating expenditure

Memo Item

C. Edwards, Trent, , ,

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: 10 / 27 / 2016

FEC Identification Number: C

Transaction ID : SB.52

Amount of Each Disbursement this Period: 880.74

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ -1617.82

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. Baymont Inn & Suites

Mailing Address 22 Sylvan Way

City Parsippany

State NJ

Zip Code 07054

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

MM / DD / YYYY
10 / 27 / 2016

FEC Identification Number

C

Transaction ID : SB.53

Amount of Each Disbursement this Period

699.20

Memo Item

Full Name (Last, First, Middle Initial)

B. FLS Connect, LLC

Mailing Address 7300 Hudson Blvd Suite 270

City St Paul

State MN

Zip Code 55128

Purpose of Disbursement Conference call

001

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2016

FEC Identification Number

C

Transaction ID : SB.28

Amount of Each Disbursement this Period

1124.74

Memo Item

Full Name (Last, First, Middle Initial)

C. Newton Heath LLC

Mailing Address P.O. Box 581

City Alexandria

State VA

Zip Code 22313

Purpose of Disbursement Survey

005

Category/Type

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 27 / 2016

FEC Identification Number

C

Transaction ID : SB.40

Amount of Each Disbursement this Period

19372.00

Memo Item

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

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

20496.74

**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. Newton Heath LLC		Date of Disbursement MM / DD / YYYY 10 / 27 / 2016
Mailing Address P.O. Box 581		FEC Identification Number C [REDACTED] Transaction ID : SB.42 Amount of Each Disbursement this Period 19372.00
City Alexandria	State VA	Zip Code 22313
Purpose of Disbursement Survey	Category/Type 005	
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. North Star Opinion Research, Inc.		Date of Disbursement MM / DD / YYYY 10 / 27 / 2016
Mailing Address 112 North Alfred Street		FEC Identification Number C [REDACTED] Transaction ID : SB.41 Amount of Each Disbursement this Period 17000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Survey	Category/Type 005	
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) C. North Star Opinion Research, Inc.		Date of Disbursement MM / DD / YYYY 10 / 27 / 2016
Mailing Address 112 North Alfred Street		FEC Identification Number C [REDACTED] Transaction ID : SB.43 Amount of Each Disbursement this Period 23000.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Survey	Category/Type 005	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	59372.00
TOTAL 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) A. Anne Schroeder Mullins & Co.			Date of Disbursement MM / DD / YYYY 10 / 28 / 2016		
Mailing Address 4436 Yuma Street, NW			FEC Identification Number C [REDACTED] Transaction ID : SB.10 Amount of Each Disbursement this Period 3000.00		
City Washington	State DC	Zip Code 20016	Category/Type 001		
Purpose of Disbursement Communications consulting		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. DT Client Services LLC			Date of Disbursement MM / DD / YYYY 10 / 28 / 2016		
Mailing Address 1101 14th Street NW Suite 650			FEC Identification Number C [REDACTED] Transaction ID : SB.26 Amount of Each Disbursement this Period 6429.95		
City Washington	State DC	Zip Code 20005	Category/Type 001		
Purpose of Disbursement Media optimization		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) C. First National Bank			Date of Disbursement MM / DD / YYYY 10 / 31 / 2016		
Mailing Address P.O. Box 2557			FEC Identification Number C [REDACTED] Transaction ID : SB.54 Amount of Each Disbursement this Period 5165.35		
City Omaha	State NE	Zip Code 68103	Category/Type 003		
Purpose of Disbursement Credit Card - See memo entries		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				

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

14595.30

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. Delta Airlines		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address 1030 Delta Blvd.		FEC Identification Number C [REDACTED] Transaction ID : SB.59 Amount of Each Disbursement this Period [REDACTED] 986.20
City Atlanta	State GA	Zip Code 30354
Purpose of Disbursement Airfare	Category/Type 002	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) B. FedEx		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address 3875 Airways		FEC Identification Number C [REDACTED] Transaction ID : SB.55 Amount of Each Disbursement this Period [REDACTED] 272.75
City Memphis	State TN	Zip Code 38116
Purpose of Disbursement Printing and shipping	Category/Type 001	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) C. Lambeau Field		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address 1265 Lombardi Ave.		FEC Identification Number C [REDACTED] Transaction ID : SB.56 Amount of Each Disbursement this Period [REDACTED] 3356.97
City Green Bay	State WI	Zip Code 54304
Purpose of Disbursement Event catering	Category/Type 003	
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<input checked="" type="checkbox"/> Memo Item		

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 0.00
TOTAL 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. Microsoft

Full Name (Last, First, Middle Initial)

Mailing Address One Microsoft Way

City Redmond State WA Zip Code 98052

Purpose of Disbursement Computer services

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 31 / 2016

FEC Identification Number C

Transaction ID : SB.58

Amount of Each Disbursement this Period 114.47

Memo Item

B. Pantheon

Full Name (Last, First, Middle Initial)

Mailing Address 717 California Street

City San Francisco State CA Zip Code 94108

Purpose of Disbursement Website development

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 31 / 2016

FEC Identification Number C

Transaction ID : SB.57

Amount of Each Disbursement this Period 105.75

Memo Item

C. SRCP Media

Full Name (Last, First, Middle Initial)

Mailing Address 201 North Union Street Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Survey

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement 10 / 31 / 2016

FEC Identification Number C

Transaction ID : SB.45

Amount of Each Disbursement this Period 5193.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5193.00

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

Full Name (Last, First, Middle Initial) A. The Tarrance Group		Date of Disbursement MM / DD / YYYY 10 / 31 / 2016
Mailing Address 201 N. Union St. Suite 410		FEC Identification Number C [REDACTED] Transaction ID : SB.44 Amount of Each Disbursement this Period 21355.00
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Survey	Category/Type 005	
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. American Media & Advocacy Group		Date of Disbursement MM / DD / YYYY 11 / 01 / 2016
Mailing Address 815 Slaters Lane		FEC Identification Number C [REDACTED] Transaction ID : SB.68 Amount of Each Disbursement this Period -333865.86 Independent expenditure previously reported as operating expenditure
City Alexandria	State VA	Zip Code 22314
Purpose of Disbursement Media placement	Category/Type 004	
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) C. CMDI		Date of Disbursement MM / DD / YYYY 11 / 01 / 2016
Mailing Address 1593 Spring Hill Road Suite 400		FEC Identification Number C [REDACTED] Transaction ID : SB.2 Amount of Each Disbursement this Period 132.59
City Tysons Corner	State VA	Zip Code 22182
Purpose of Disbursement Merchant fee	Category/Type 003	
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:		

SUBTOTAL of Disbursements This Page (optional).....▶	-312378.27
TOTAL 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

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

Full Name (Last, First, Middle Initial)

A. E.C. Maruggi Incorporated

Mailing Address 660 South Howell St.

City
St. Paul

State
MN

Zip Code
55116

Purpose of Disbursement
Business consulting

001

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
11			01			2016			

FEC Identification Number

C

Transaction ID : SB.11

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. Meeting Street Research, LLC

Mailing Address 413 Pitt Street

City
Mount Pleasant

State
SC

Zip Code
29464

Purpose of Disbursement
Survey

005

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
11			01			2016			

FEC Identification Number

C

Transaction ID : SB.46

Amount of Each Disbursement this Period

60000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Push Digital

Mailing Address PO Box 7431

City
Columbia

State
SC

Zip Code
29202

Purpose of Disbursement
Media placement

004

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
11			01			2016			

FEC Identification Number

C

Transaction ID : SB.72

Amount of Each Disbursement this Period

-25000.00

Memo Item Independent expenditure previously reported as operating expenditure

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

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

36000.00

**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)

A. Advoc8

Mailing Address 1342 Florida Avenue NW

City Washington State DC Zip Code 20009

Purpose of Disbursement Media production - Non independent expenditure

004

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2016

FEC Identification Number

C

Transaction ID : SB.12

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DT Client Services LLC

Mailing Address 1101 14th Street NW Suite 650

City Washington State DC Zip Code 20005

Purpose of Disbursement Media optimization

001

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2016

FEC Identification Number

C

Transaction ID : SB.27

Amount of Each Disbursement this Period

2172.37

Memo Item

Full Name (Last, First, Middle Initial)

C. McLaughlin & Associates, Inc.

Mailing Address 566 S. Route 303

City Blauvelt State NY Zip Code 10913

Purpose of Disbursement Survey

005

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 02 / 2016

FEC Identification Number

C

Transaction ID : SB.51

Amount of Each Disbursement this Period

22000.00

Memo Item

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

25672.37

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. NMB Research LLC		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 206 N. Fayette St.		FEC Identification Number C [REDACTED] Transaction ID : SB.50 Amount of Each Disbursement this Period 24000.00	
City Alexandria	State VA	Zip Code 22314	Category/ Type 005
Purpose of Disbursement Survey		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. PCI Payment Solutions		Date of Disbursement MM / DD / YYYY 11 / 02 / 2016	
Mailing Address 902 Chinquapin		FEC Identification Number C [REDACTED] Transaction ID : SB.3 Amount of Each Disbursement this Period 764.93	
City McLean	State VA	Zip Code 22102	Category/ Type 003
Purpose of Disbursement Merchant fee		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) C. Tanner, Jenny, , ,		Date of Disbursement MM / DD / YYYY 11 / 03 / 2016	
Mailing Address 1747 Pennsylvania Ave. NW 5th Floor		FEC Identification Number C [REDACTED] Transaction ID : SB.60 Amount of Each Disbursement this Period 60.80	
City Washington	State DC	Zip Code 20006	Category/ Type 002
Purpose of Disbursement Travel		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		

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

24825.73

TOTAL 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) A. Conston Communications		Date of Disbursement MM / DD / YYYY 11 / 04 / 2016	
Mailing Address 1758 U St. NW, Unit 3		FEC Identification Number C [REDACTED]	
City Washington	State DC	Zip Code 20009	Transaction ID : SB.13
Purpose of Disbursement Strategy consulting		Category/Type 001	Amount of Each Disbursement this Period 7500.00
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. Red Edge		Date of Disbursement MM / DD / YYYY 11 / 04 / 2016	
Mailing Address 2300 Clarendon Blvd. #901		FEC Identification Number C [REDACTED]	
City Arlington	State VA	Zip Code 22201	Transaction ID : SB.29
Purpose of Disbursement Website design and development		Category/Type 001	Amount of Each Disbursement this Period 7525.00
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) C. American Express		Date of Disbursement MM / DD / YYYY 11 / 07 / 2016	
Mailing Address PO Box 53852		FEC Identification Number C [REDACTED]	
City Phoenix	State AZ	Zip Code 85072	Transaction ID : SB.4
Purpose of Disbursement Merchant fee		Category/Type 003	Amount of Each Disbursement this Period 1747.63
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).....▶	16772.63
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. CMDI

Mailing Address 1593 Spring Hill Road
Suite 400

City Tysons Corner State VA Zip Code 22182

Purpose of Disbursement
Merchant fee

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
11 / 08 / 2016

FEC Identification Number

Transaction ID : SB.5
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. Guerra, Ruth, , ,

Mailing Address 1747 Pennsylvania Ave. NW
5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement
Travel - see memo entry

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
11 / 09 / 2016

FEC Identification Number

Transaction ID : SB.61
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. American Airlines

Mailing Address 4333 Amon Carter Blvd.

City Ft. Worth State TX Zip Code 76155

Purpose of Disbursement
Airfare

Category/
Type

Candidate Name

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

Date of Disbursement
MM / DD / YYYY
11 / 09 / 2016

FEC Identification Number

Transaction ID : SB.62
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)

A. 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
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB.22
Amount of Each Disbursement this Period

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
State: District: Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB.23
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address PO Box 53852

City Phoenix State AZ Zip Code 85072

Purpose of Disbursement
Merchant fee

003
Category/
Type

Candidate Name

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

Date of Disbursement

/ /

FEC Identification Number

C
Transaction ID : SB.6
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)

A. Strategic Partners & Media Inc.

Mailing Address 1851A McGuckian Street

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Media consulting
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
11 / 14 / 2016

FEC Identification Number
C
Transaction ID : **SB.14**
Amount of Each Disbursement this Period
19971.16

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
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
11 / 14 / 2016

FEC Identification Number
C
Transaction ID : **SB.24**
Amount of Each Disbursement this Period
156515.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Strategic Perception Inc.

Mailing Address 6158 Mulholland Highway

City Hollywood State CA Zip Code 90068

Purpose of Disbursement Media consulting
Candidate Name
Category/Type **001**

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

Date of Disbursement
MM / DD / YYYY
11 / 15 / 2016

FEC Identification Number
C
Transaction ID : **SB.15**
Amount of Each Disbursement this Period
50928.24

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 227414.40

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)					PAGE 52 OF 146
	<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. Ettari, James, , ,

Date of Disbursement: 11 / 17 / 2016

Mailing Address: 1747 Pennsylvania Ave. NW, 5th Floor
City: Washington, State: DC, Zip Code: 20006

Purpose of Disbursement: Travel
Candidate Name: _____
Category/Type: 002

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

FEC Identification Number: **C**
Transaction ID: **SB.63**
Amount of Each Disbursement this Period: 37.93
 Memo Item

Full Name (Last, First, Middle Initial)
B. LPC 25 LLC

Date of Disbursement: 11 / 17 / 2016

Mailing Address: 120 Newport Center Dr.
City: Newport Beach, State: CA, Zip Code: 92660

Purpose of Disbursement: Fundraising consulting
Candidate Name: _____
Category/Type: 003

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

FEC Identification Number: **C**
Transaction ID: **SB.8**
Amount of Each Disbursement this Period: 1437385.00
 Memo Item

Full Name (Last, First, Middle Initial)
C. RedPrint Strategy LLC

Date of Disbursement: 11 / 18 / 2016

Mailing Address: P.O. Box 710993
City: Herndon, State: VA, Zip Code: 20171

Purpose of Disbursement: Media consulting
Candidate Name: _____
Category/Type: 001

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

FEC Identification Number: **C**
Transaction ID: **SB.16**
Amount of Each Disbursement this Period: 308245.00
 Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ► 1745667.93

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. Scott Howell & Company		Date of Disbursement MM / DD / YYYY 11 / 18 / 2016	
Mailing Address 3900 Willow St., Suite 200		FEC Identification Number C [REDACTED]	
City Dallas	State TX	Zip Code 75226	Transaction ID : SB.17
Purpose of Disbursement Media consulting		Category/Type 001	Amount of Each Disbursement this Period 308245.00
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. Something Else Strategies, LLC		Date of Disbursement MM / DD / YYYY 11 / 18 / 2016	
Mailing Address 212 Golden Willow Ct.		FEC Identification Number C [REDACTED]	
City Easley	State SC	Zip Code 29642	Transaction ID : SB.18
Purpose of Disbursement Media consulting		Category/Type 001	Amount of Each Disbursement this Period 308245.00
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) C. SRCP Media		Date of Disbursement MM / DD / YYYY 11 / 18 / 2016	
Mailing Address 201 North Union Street Suite 200		FEC Identification Number C [REDACTED]	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SB.19
Purpose of Disbursement Media consulting		Category/Type 001	Amount of Each Disbursement this Period 308245.00
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:			

SUBTOTAL of Disbursements This Page (optional).....▶	924735.00
TOTAL 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)

A. dmm Media, LLC

Mailing Address 1911 N. Fort Myer Drive
Suite 400

City Arlington State VA Zip Code 22209

Purpose of Disbursement
Media consulting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C

Transaction ID : SB.20

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. American Action Network

Mailing Address 1747 Pennsylvania Ave. NW
5th Floor

City Washington State DC Zip Code 20006

Purpose of Disbursement
In-Kind: Payroll/Office Space/Research

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

/ /

FEC Identification Number

C

Transaction ID : SB.64

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. Conston Communications

Mailing Address 1758 U St. NW, Unit 3

City Washington State DC Zip Code 20009

Purpose of Disbursement
Media consulting

001
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

FEC Identification Number

C

Transaction ID : SB.21

Amount of Each Disbursement this Period

Memo Item

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

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

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 55 OF 146
	FOR LINE NUMBER: (check only one)
<input type="checkbox"/> 9	<input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Honold Communications			Nature of Debt (Purpose): Media production
Mailing Address 252 9th Street, NE			
City Washington	State DC	Zip Code 20002	

Outstanding Balance Beginning This Period 17432.48	Transaction ID : SE183	
Amount Incurred This Period 0.00	Payment This Period 17432.48	Outstanding Balance at Close of This Period 0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor RedPrint Strategy			Nature of Debt (Purpose): Media production
Mailing Address P.O. Box 710993			
City Herndon	State VA	Zip Code 20171	

Outstanding Balance Beginning This Period 26387.00	Transaction ID : SE184	
Amount Incurred This Period 0.00	Payment This Period 26387.00	Outstanding Balance at Close of This Period 0.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor RedPrint Strategy			Nature of Debt (Purpose): Media production
Mailing Address P.O. Box 710993			
City Herndon	State VA	Zip Code 20171	

Outstanding Balance Beginning This Period 16878.00	Transaction ID : SE185	
Amount Incurred This Period 0.00	Payment This Period 16878.00	Outstanding Balance at Close of This Period 0.00

1) SUBTOTALS This Period This Page (optional)..... ▶	0.00
2) TOTALS This Period (last page this line number only)..... ▶	0.00
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 RedPrint Strategy	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016						
Mailing Address P.O. Box 710993	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 16878.00 </div> Transaction ID : SE001 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Herndon</td> <td>VA</td> <td>20171</td> </tr> </table>		City	State	Zip Code	Herndon	VA	20171
City		State	Zip Code				
Herndon	VA	20171					
Purpose of Expenditure Media production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Deacon, Colleen, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 24 State: NY						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 772008.43 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item RedPrint Strategy	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 18 / 2016						
Mailing Address P.O. Box 710993	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 26387.00 </div> Transaction ID : SE002 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 20 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Herndon</td> <td>VA</td> <td>20171</td> </tr> </table>		City	State	Zip Code	Herndon	VA	20171
City		State	Zip Code				
Herndon	VA	20171					
Purpose of Expenditure Media production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rosen, Jacky, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: NV						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 2189533.15 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 43265.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 43265.00 </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, , ,

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Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Honold Communications
Mailing Address: 252 9th Street NE
City: Washington State: DC Zip Code: 20002
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Eggman, Michael, ,
Office Sought: House District: 10 State: CA
Amount: 17432.48
Transaction ID: SE003
Date of Disbursement or Obligation: 10/20/2016
Disbursement For: General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria State: VA Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Perkins, Randy, ,
Office Sought: House District: 18 State: FL
Amount: 208504.19
Transaction ID: SE004
Date of Disbursement or Obligation: 10/20/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 225936.67
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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, ,

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12 / 08 / 2016

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement, Category/Type: 004
Date of Public Distribution/Dissemination: 11/01/2016
Amount: 421481.49
Transaction ID: SE005
Date of Disbursement or Obligation: 10/20/2016

Name of Federal Candidate: Perkins, Randy, ,
Support: [], Oppose: [x]
Office Sought: House [x], Senate [], President []
District: 18, State: FL
Calendar Year-To-Date Per Election for Office Sought: 3193247.26
Disbursement For: Primary [], General 2016 [x], Other (specify) []

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement, Category/Type: 004
Date of Public Distribution/Dissemination: 10/28/2016
Amount: 616658.64
Transaction ID: SE006
Date of Disbursement or Obligation: 10/20/2016

Name of Federal Candidate: Sidie, Jay, ,
Support: [], Oppose: [x]
Office Sought: House [x], Senate [], President []
District: 03, State: KS
Calendar Year-To-Date Per Election for Office Sought: 675005.10
Disbursement For: Primary [], General 2016 [x], Other (specify) []

(a) SUBTOTAL of Itemized Independent Expenditures: 1038140.13
(a) SUBTOTAL of Unitemized Independent Expenditures:
(a) TOTAL Independent Expenditures:

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, ,

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12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 815 Slaters Lane		Amount <input type="text"/>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE007
Purpose of Expenditure Media placement		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nolan, Rick, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 815 Slaters Lane		Amount <input type="text"/>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE008
Purpose of Expenditure Media placement		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nolan, Rick, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Target Enterprises
Mailing Address: 15260 Ventura Blvd. Suite 1240
City: Sherman Oaks State: CA Zip Code: 91403
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, ,
Office Sought: House District: 19 State: NY
Amount: 450000.00
Transaction ID: SE009
Date of Disbursement or Obligation: 10/21/2016
Disbursement For: General 2016

Full Name of Payee: Scott Howell & Company
Mailing Address: 3900 Willow St Suite 200
City: Dallas State: TX Zip Code: 75226
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Perkins, Randy, ,
Office Sought: House District: 18 State: FL
Amount: 40910.58
Transaction ID: SE010
Date of Disbursement or Obligation: 10/21/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 490910.58
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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.

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12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Push Digital		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016	
Mailing Address P.O. Box 21892		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>	
City Charleston	State SC	Zip Code 29413	Transaction ID : SE011 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Perkins, Randy, , ,		<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: 18 State: FL	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">2114216.49</div>			

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 20 / 2016	
Mailing Address 435 E Main St Suite 250		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">750.00</div>	
City Greenwood	State IN	Zip Code 46143	Transaction ID : SE012 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 21 / 2016
Purpose of Expenditure Media production		Category/Type 004	
Name of Federal Candidate: Nolan, Rick, , ,		<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: 08 State: MN	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">1835601.62</div>			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">50750.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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, , ,

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Date

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 12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee
American Media & Advocacy Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Media placement Category/Type
004
Date of Public Distribution/Dissemination
10 / 25 / 2016
Amount
570755.00
Transaction ID : SE013
Date of Disbursement or Obligation
10 / 21 / 2016

Name of Federal Candidate:
Bennett, LuAnn, , ,
Support Oppose
Office Sought:
House District: 10
President Senate State: VA
Calendar Year-To-Date
Per Election for Office Sought
1859159.83
Disbursement For:
Primary General
Other (specify)

Full Name of Payee
American Media & Advocacy Group
Mailing Address
815 Slaters Lane
City
Alexandria State
VA Zip Code
22314
Purpose of Expenditure
Media placement Category/Type
004
Date of Public Distribution/Dissemination
11 / 01 / 2016
Amount
569140.00
Transaction ID : SE014
Date of Disbursement or Obligation
10 / 21 / 2016

Name of Federal Candidate:
Bennett, LuAnn, , ,
Support Oppose
Office Sought:
House District: 10
President Senate State: VA
Calendar Year-To-Date
Per Election for Office Sought
3083362.83
Disbursement For:
Primary General
Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures
1139895.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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Date

12 / 08 / 2016

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Honold Communications
Mailing Address: 252 9th Street NE
City: Washington, State: DC, Zip Code: 20002
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Schwartz, Gale, , ,
Office Sought: House, District: 03, State: CO
Amount: 18613.00
Transaction ID: SE015
Date of Disbursement or Obligation: 10/21/2016
Disbursement For: General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Owens, Doug, , ,
Office Sought: House, District: 04, State: UT
Amount: 274236.88
Transaction ID: SE016
Date of Disbursement or Obligation: 10/21/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 292849.88
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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, , ,

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Date

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Dittmar, Jane, ,
Office Sought: House, District: 05, State: VA
Amount: 347592.54
Transaction ID: SE017
Date of Disbursement or Obligation: 10/21/2016
Disbursement For: General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Dittmar, Jane, ,
Office Sought: House, District: 05, State: VA
Amount: 340931.09
Transaction ID: SE018
Date of Disbursement or Obligation: 10/21/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 688523.63
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, ,

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Date

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee Cold Spark Media
Mailing Address 307 Fourth Ave. Suite 920
City Pittsburgh State PA Zip Code 15222
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House District: 19 State: NY
Calendar Year-To-Date Per Election for Office Sought 3596270.43
Disbursement For: General 2016

Full Name of Payee Cold Spark Media
Mailing Address 307 Fourth Ave. Suite 920
City Pittsburgh State PA Zip Code 15222
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House District: 19 State: NY
Calendar Year-To-Date Per Election for Office Sought 3614530.53
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 36520.20
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Nolan, Rick, , ,
Office Sought: House, District: 08, State: MN
Disbursement For: General 2016
Amount: 57942.50
Transaction ID: SE021
Date of Disbursement or Obligation: 10/24/2016
Calendar Year-To-Date Per Election for Office Sought: 4095633.05

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, , ,
Office Sought: House, District: 03, State: IA
Disbursement For: General 2016
Amount: 231260.19
Transaction ID: SE022
Date of Disbursement or Obligation: 10/24/2016
Calendar Year-To-Date Per Election for Office Sought: 999476.19

(a) SUBTOTAL of Itemized Independent Expenditures: 289202.69
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement, Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, , , Support: [], Oppose: [x]
Office Sought: [x] House, District: 03, State: IA
Amount: 231260.19
Transaction ID: SE023
Date of Disbursement or Obligation: 10/24/2016
Disbursement For: [] Primary, [x] General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement, Category/Type: 004
Name of Federal Candidate: Derrick, Mike, , , Support: [], Oppose: [x]
Office Sought: [x] House, District: 21, State: NY
Amount: 360721.25
Transaction ID: SE024
Date of Disbursement or Obligation: 10/24/2016
Disbursement For: [] Primary, [x] General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 591981.44
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 American Media & Advocacy Group		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016	
Mailing Address 815 Slaters Lane		Amount M M / D D / Y Y Y Y Y Y 940901.13	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE025 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 24 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Cain, Emily, , ,		<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: <u>02</u> State: <u>ME</u>	
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 941264.47		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016	
Mailing Address P.O. Box 21892		Amount M M / D D / Y Y Y Y Y Y 50090.00	
City Charleston	State SC	Zip Code 29413	Transaction ID : SE026 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 24 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Cain, Emily, , ,		<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: <u>02</u> State: <u>ME</u>	
Calendar Year-To-Date Per Election for Office Sought M M / D D / Y Y Y Y Y Y 991354.47		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y 990991.13
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y
(a) TOTAL Independent Expenditures ▶	M M / D D / Y Y Y Y Y Y

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
 12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 21892		Amount <input type="text"/>	
City Charleston	State SC	Zip Code 29413	Transaction ID : SE027
Purpose of Expenditure Media placement		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Carroll, Morgan, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 815 Slaters Lane		Amount <input type="text"/>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE028
Purpose of Expenditure Media placement		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Carroll, Morgan, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

/ /

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 American Media & Advocacy Group		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016	
Mailing Address 815 Slaters Lane		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">302680.75</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE029 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 24 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Nelson, Tom, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">355268.01</div>			

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016	
Mailing Address 815 Slaters Lane		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">302680.75</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE030 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 24 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Nelson, Tom, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">689328.76</div>			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">605361.50</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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
12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Cold Spark Media
Mailing Address: 307 Fourth Ave. Suite 920
City: Pittsburgh State: PA Zip Code: 15222
Purpose of Expenditure: Direct mail Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House District: 19 State: NY
Calendar Year-To-Date Per Election for Office Sought: 3692685.99
Disbursement For: General 2016

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria State: VA Zip Code: 22314
Purpose of Expenditure: Media placement Category/Type: 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House District: 18 State: FL
Calendar Year-To-Date Per Election for Office Sought: 2661195.62
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 571050.72
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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Date

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Bennett, LuAnn, , ,
Office Sought: House, District: 10, State: VA
Amount: 59464.00
Transaction ID: SE033
Date of Disbursement or Obligation: 10/25/2016
Disbursement For: General 2016

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, , ,
Office Sought: House, District: 03, State: IA
Amount: 600.00
Transaction ID: SE034
Date of Disbursement or Obligation: 10/25/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 60064.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Something Else Strategies		Date of Public Distribution/Dissemination 10 / 25 / 2016	
Mailing Address 212 Golden Willow Ct		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19000.00</div>	
City Easley	State SC	Zip Code 29642	Transaction ID : SE035 Date of Disbursement or Obligation 10 / 25 / 2016
Purpose of Expenditure Media production		Category/Type 004	
Name of Federal Candidate: Ashford, Brad, , ,		<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: <u>02</u> State: <u>NE</u>	
Calendar Year-To-Date Per Election for Office Sought 765026.25		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination 10 / 25 / 2016	
Mailing Address 815 Slaters Lane		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">323268.63</div>	
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE036 Date of Disbursement or Obligation 10 / 25 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Schwartz, Gale, , ,		<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: <u>03</u> State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought 1465757.79		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">342268.63</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Garcia, Joe, , Support/Oppose
Office Sought: House, District: 26, State: FL
Amount: 54927.00
Transaction ID: SE037
Date of Disbursement or Obligation: 10/25/2016
Disbursement For: General 2016

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Dittmar, Jane, , Support/Oppose
Office Sought: House, District: 05, State: VA
Amount: 20000.00
Transaction ID: SE038
Date of Disbursement or Obligation: 10/25/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 74927.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, ,

[Electronically Filed]

Date

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Scott Howell & Company			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016		
Mailing Address 3900 Willow St Suite 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 16000.00 </div>		
City Dallas	State TX	Zip Code 75226			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SE039 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Cain, Emily, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: ME		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1007354.47 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Conston Communications			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016		
Mailing Address 1758 U St. NW Unit 3			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 18000.00 </div>		
City Washington	State DC	Zip Code 20009			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SE040 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 25 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Carroll, Morgan, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: CO		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 1177337.72 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 34000.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 34000.00 </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
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1911 N Fort Myer Drive Suite 400		Amount <input type="text"/>	
City Arlington	State VA	Zip Code 22209	Transaction ID : SE041
Purpose of Expenditure Media production		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nelson, Tom, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1911 N Fort Myer Drive Suite 400		Amount <input type="text"/>	
City Arlington	State VA	Zip Code 22209	Transaction ID : SE042
Purpose of Expenditure Media production		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nelson, Tom, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

/ /

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on MM / DD / YYYY

Full Name of Payee The Prosper Group Corporation <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 25 / 2016
Mailing Address 435 E Main St Suite 250	Amount 31380.00
City Greenwood State IN Zip Code 46143	
Purpose of Expenditure Media placement Category/Type 004	Transaction ID : SE043 Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016
Name of Federal Candidate: Nelson, Tom, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 52587.26	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Political Ink <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2016
Mailing Address 1220 19th Street NW Suite 502	Amount 10582.90
City Washington State DC Zip Code 20036	
Purpose of Expenditure Direct mail Category/Type 004	Transaction ID : SE044 Date of Disbursement or Obligation MM / DD / YYYY 10 / 25 / 2016
Name of Federal Candidate: Smucker, Lloyd, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 16 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 10582.90	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	▶ 41962.90
(a) SUBTOTAL of Unitemized Independent Expenditures	▶
(a) TOTAL Independent Expenditures	▶

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

MM / DD / YYYY
12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Advoc8
Mailing Address: 1342 Florida Ave NW
City: Washington, State: DC, Zip Code: 20009
Purpose of Expenditure: Media production
Category/Type: 004
Date of Public Distribution/Dissemination: 10/25/2016
Amount: 4700.00
Transaction ID: SE045
Date of Disbursement or Obligation: 10/26/2016
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House, District: 19, State: NY
Disbursement For: General 2016

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892
City: Charleston, State: SC, Zip Code: 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Date of Public Distribution/Dissemination: 10/27/2016
Amount: 19370.00
Transaction ID: SE046
Date of Disbursement or Obligation: 10/26/2016
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House, District: 19, State: NY
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 24070.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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Date

12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Cold Spark Media	Date of Public Distribution/Dissemination 10 / 31 / 2016			
Mailing Address 307 Fourth Ave. Suite 920	Amount 32183.87			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Pittsburgh</td> <td style="width:17%; border-bottom: 1px solid black;">State PA</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 15222</td> </tr> </table>		City Pittsburgh	State PA	Zip Code 15222
City Pittsburgh		State PA	Zip Code 15222	
Purpose of Expenditure Direct mail Category/Type 004				
Name of Federal Candidate: Teachout, Zephyr, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 19 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY			
Calendar Year-To-Date Per Election for Office Sought 3646714.40	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item Advoc8	Date of Public Distribution/Dissemination 10 / 25 / 2016			
Mailing Address 1342 Florida Ave NW	Amount 4700.00			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Washington</td> <td style="width:17%; border-bottom: 1px solid black;">State DC</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Media production Category/Type 004				
Name of Federal Candidate: Perkins, Randy, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL			
Calendar Year-To-Date Per Election for Office Sought 2665895.62	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	36883.87
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Connection Strategy <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 2192		Amount <input type="text"/>	
City Arlington	State VA	Zip Code 22202	Transaction ID : SE049
Purpose of Expenditure Phone calls		Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Perkins, Randy, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2704702.12		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Advoc8 <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1342 Florida Ave NW		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20009	Transaction ID : SE050
Purpose of Expenditure Media production		Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Gallego, Pete, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1687384.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 48206.50
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Date

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Advoc8	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1342 Florida Ave NW	Amount <input type="text"/>
City Washington State DC Zip Code 20009	Transaction ID : SE051
Purpose of Expenditure Media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nolan, Rick, , <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: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1911 N Fort Myer Drive Suite 400	Amount <input type="text"/>
City Arlington State VA Zip Code 22209	Transaction ID : SE052
Purpose of Expenditure Media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nolan, Rick, , <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: 08 State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 DMM Media		Date of Public Distribution/Dissemination 10 / 25 / 2016	
Mailing Address 1911 N Fort Myer Drive Suite 400		Amount 14943.50	
City Arlington	State VA	Zip Code 22209	Transaction ID : SE053 Date of Disbursement or Obligation 10 / 26 / 2016
Purpose of Expenditure Media production		Category/Type 004	
Name of Federal Candidate: Nolan, Rick, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>	
Calendar Year-To-Date Per Election for Office Sought 2983063.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation		Date of Public Distribution/Dissemination 10 / 25 / 2016	
Mailing Address 435 E Main St Suite 250		Amount 131161.00	
City Greenwood	State IN	Zip Code 46143	Transaction ID : SE054 Date of Disbursement or Obligation 10 / 26 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Nolan, Rick, , ,		Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>	
Calendar Year-To-Date Per Election for Office Sought 3114224.04		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	146104.50
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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Date

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NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Advoc8	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016						
Mailing Address 1342 Florida Ave NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 9400.00 </div> Transaction ID : SE055 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%;">City</td> <td style="width:15%;">State</td> <td style="width:50%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20009</td> </tr> </table>		City	State	Zip Code	Washington	DC	20009
City		State	Zip Code				
Washington	DC	20009					
Purpose of Expenditure Media production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Rosen, Jacky, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: NV						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 2253033.15 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Advoc8	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016						
Mailing Address 1342 Florida Ave NW	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 4700.00 </div> Transaction ID : SE056 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%;">City</td> <td style="width:15%;">State</td> <td style="width:50%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20009</td> </tr> </table>		City	State	Zip Code	Washington	DC	20009
City		State	Zip Code				
Washington	DC	20009					
Purpose of Expenditure Media production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Bennett, LuAnn, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 10 State: VA						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1923323.83 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 14100.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 0.00 </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 14100.00 </div>

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M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

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ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item RedPrint Strategy	Date of Public Distribution/Dissemination 10 / 25 / 2016			
Mailing Address P.O. Box 710993	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15456.00</div> Transaction ID : SE057 Date of Disbursement or Obligation 10 / 26 / 2016			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Herndon</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 20171</td> </tr> </table>		City Herndon	State VA	Zip Code 20171
City Herndon		State VA	Zip Code 20171	
Purpose of Expenditure Media production				
Name of Federal Candidate: <input type="checkbox"/> Support Bennett, LuAnn, , , <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>			
Calendar Year-To-Date Per Election for Office Sought 1938779.83	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination 10 / 28 / 2016			
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">458373.00</div> Transaction ID : SE058 Date of Disbursement or Obligation 10 / 26 / 2016			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure Media placement				
Name of Federal Candidate: <input type="checkbox"/> Support Bennett, LuAnn, , , <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>			
Calendar Year-To-Date Per Election for Office Sought 2397152.83	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%;">473829.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; width: 100%; height: 20px;"> </div>

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Crosby, Caleb, , ,

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NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 DMM Media	Date of Public Distribution/Dissemination 10 / 25 / 2016			
Mailing Address 1911 N Fort Myer Drive Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2992.10</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Arlington</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22209</td> </tr> </table>		City Arlington	State VA	Zip Code 22209
City Arlington		State VA	Zip Code 22209	
Purpose of Expenditure Media production				
Name of Federal Candidate: Mowrer, Jim, , , <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: 03 State: IA			
Calendar Year-To-Date Per Election for Office Sought 1003068.29	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media	Date of Public Distribution/Dissemination 10 / 25 / 2016			
Mailing Address 1911 N Fort Myer Drive Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14929.29</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Arlington</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22209</td> </tr> </table>		City Arlington	State VA	Zip Code 22209
City Arlington		State VA	Zip Code 22209	
Purpose of Expenditure Media production				
Name of Federal Candidate: Mowrer, Jim, , , <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: 03 State: IA			
Calendar Year-To-Date Per Election for Office Sought 1017997.58	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">17921.39</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Connection Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 14663.89 </div>		
City Arlington	State VA	Zip Code 22202			
Purpose of Expenditure Phone calls		Category/Type 004	Transaction ID : SE061 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016		
Name of Federal Candidate: Ashford, Brad, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 779690.14 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Advoc8			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 25 / 2016		
Mailing Address 1342 Florida Ave NW			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 4700.00 </div>		
City Washington	State DC	Zip Code 20009			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SE062 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 26 / 2016		
Name of Federal Candidate: Santarsiero, Steve, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> 2018456.37 </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 19363.89 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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12 / 08 / 2016

Signature

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

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy	Date of Public Distribution/Dissemination 10 / 27 / 2016			
Mailing Address P.O. Box 2192	Amount 60226.84			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Arlington</td> <td style="width:17%; border-bottom: 1px solid black;">State VA</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 22202</td> </tr> </table>		City Arlington	State VA	Zip Code 22202
City Arlington		State VA	Zip Code 22202	
Purpose of Expenditure Phone calls				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Santarsiero, Steve, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>08</u> State: <u>PA</u>			
Calendar Year-To-Date Per Election for Office Sought 2078683.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item Advoc8	Date of Public Distribution/Dissemination 10 / 25 / 2016			
Mailing Address 1342 Florida Ave NW	Amount 9400.00			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-bottom: 1px solid black;">City Washington</td> <td style="width:17%; border-bottom: 1px solid black;">State DC</td> <td style="width:50%; border-bottom: 1px solid black;">Zip Code 20009</td> </tr> </table>		City Washington	State DC	Zip Code 20009
City Washington		State DC	Zip Code 20009	
Purpose of Expenditure Media production				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Garcia, Joe, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>26</u> State: <u>FL</u>			
Calendar Year-To-Date Per Election for Office Sought 1175451.90	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	69626.84
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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, , ,

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Date

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 RedPrint Strategy	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 25 / 2016 </div>						
Mailing Address P.O. Box 710993	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 16366.00 </div> Transaction ID : SE065 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 26 / 2016 </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Herndon</td> <td>VA</td> <td>20171</td> </tr> </table>		City	State	Zip Code	Herndon	VA	20171
City		State	Zip Code				
Herndon	VA	20171					
Purpose of Expenditure Media production	Category/Type 004						
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Garcia, Joe, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>26</u> State: <u>FL</u>						
Calendar Year-To-Date Per Election for Office Sought 1246744.90	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy	Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 27 / 2016 </div>						
Mailing Address P.O. Box 2192	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 29718.00 </div> Transaction ID : SE066 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 26 / 2016 </div>						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Arlington</td> <td>VA</td> <td>22202</td> </tr> </table>		City	State	Zip Code	Arlington	VA	22202
City		State	Zip Code				
Arlington	VA	22202					
Purpose of Expenditure Phone calls	Category/Type 004						
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Curbelo, Carlos, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>26</u> State: <u>FL</u>						
Calendar Year-To-Date Per Election for Office Sought 1276462.90	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 46084.00 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

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M M / D D / Y Y Y Y Y Y
 12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Connection Strategy <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 2192		Amount <input type="text"/>	
City Arlington	State VA	Zip Code 22202	Transaction ID : SE067
Purpose of Expenditure Phone calls		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Cain, Emily, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>ME</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Push Digital <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 21892		Amount <input type="text"/>	
City Charleston	State SC	Zip Code 29413	Transaction ID : SE068
Purpose of Expenditure Media placement		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Carroll, Morgan, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>	
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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

/ /

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 Connection Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 28 / 2016</div>		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">29795.34</div>		
City Arlington	State VA	Zip Code 22202			
Purpose of Expenditure Phone calls		Category/ Type 004	Transaction ID : SE069 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 26 / 2016</div>		
Name of Federal Candidate: Valadao, David, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>21</u> State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 29795.34			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 28 / 2016</div>		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">30043.60</div>		
City Arlington	State VA	Zip Code 22202			
Purpose of Expenditure Phone calls		Category/ Type 004	Transaction ID : SE070 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 26 / 2016</div>		
Name of Federal Candidate: Bishop, Mike, , , <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>08</u> State: <u>MI</u>		
Calendar Year-To-Date Per Election for Office Sought 30043.60			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">59838.94</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </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, , ,

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Date

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

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee Gridiron Communications
Mailing Address 3902 Portage Road Suite C #262
City South Bend State IN Zip Code 46628
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House District: 18 State: FL
Calendar Year-To-Date Per Election for Office Sought 2717684.97
Disbursement For: General 2016

Full Name of Payee The Prosper Group Corporation
Mailing Address 435 E Main St Suite 250
City Greenwood State IN Zip Code 46143
Purpose of Expenditure Media placement Category/Type 004
Name of Federal Candidate: Sidie, Jay, , ,
Office Sought: House District: 03 State: KS
Calendar Year-To-Date Per Election for Office Sought 725005.10
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 62982.85
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,
Signature

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Date 12 / 08 / 2016

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Nolan, Rick, , Support/Oppose
Office Sought: House, District: 08, State: MN
Amount: 131461.00
Transaction ID: SE073
Date of Disbursement or Obligation: 10/27/2016
Disbursement For: General 2016

Full Name of Payee: Connection Strategy
Mailing Address: P.O. Box 2192, Arlington, VA 22202
Purpose of Expenditure: Phone calls
Category/Type: 004
Name of Federal Candidate: Tarkanian, Danny, , Support/Oppose
Office Sought: House, District: 03, State: NV
Amount: 24990.05
Transaction ID: SE074
Date of Disbursement or Obligation: 10/27/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 156451.05
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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, ,

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12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Connection Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2016		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">24990.05</div>		
City Arlington	State VA	Zip Code 22202			
Purpose of Expenditure Phone calls		Category/Type 004	Transaction ID : SE075 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Name of Federal Candidate: Rosen, Jacky, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<div style="border: 1px solid black; padding: 2px; text-align: right;">2364513.25</div>					

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Mailing Address 435 E Main St Suite 250			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">59464.00</div>		
City Greenwood	State IN	Zip Code 46143			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SE076 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Name of Federal Candidate: Bennett, LuAnn, , ,			Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		
<div style="border: 1px solid black; padding: 2px; text-align: right;">2514222.83</div>					

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">84454.05</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

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Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 SRCP Media	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2016						
Mailing Address 201 N Union St Suite 200	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">18327.00</div> Transaction ID : SE077 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure Media production							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Heinz, Matt, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: AZ						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">632677.60</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2016						
Mailing Address P.O. Box 2192	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">30000.00</div> Transaction ID : SE078 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Arlington</td> <td>VA</td> <td>22202</td> </tr> </table>		City	State	Zip Code	Arlington	VA	22202
City		State	Zip Code				
Arlington	VA	22202					
Purpose of Expenditure Phone calls							
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose McSally, Martha, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: AZ						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">662677.60</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">48327.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

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Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Push Digital		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. Box 21892			Amount <input type="text"/>
City Charleston	State SC	Zip Code 29413	Transaction ID : SE079
Purpose of Expenditure Media placement		Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Ashford, Brad, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 799690.14	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee American Media & Advocacy Group		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 815 Slaters Lane			Amount <input type="text"/>
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE080
Purpose of Expenditure Media placement		Category/Type <input type="text"/> 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Ashford, Brad, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>02</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NE</u>
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/> 1093717.39	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 314027.25
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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

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Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Push Digital			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2016		
Mailing Address P.O. Box 21892			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">40000.00</div>		
City Charleston	State SC	Zip Code 29413			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SE081 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Name of Federal Candidate: Santarsiero, Steve, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought 2118683.21			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2016		
Mailing Address 435 E Main St Suite 250			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">22000.00</div>		
City Greenwood	State IN	Zip Code 46143			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SE082 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Name of Federal Candidate: Owens, Doug, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 04 <input type="checkbox"/> President <input type="checkbox"/> Senate State: UT		
Calendar Year-To-Date Per Election for Office Sought 316031.03			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">62000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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
 Signature 12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Craig Miller Productions		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1491 Northside Dr. Suite B		Amount <input type="text"/> 18980.00
City Atlanta	State GA	
Zip Code 30318	Purpose of Expenditure Media production	Transaction ID : SE083
Name of Federal Candidate: Dittmar, Jane, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/> 386572.54	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 435 E Main St Suite 250		Amount <input type="text"/> 20000.00
City Greenwood	State IN	
Zip Code 46143	Purpose of Expenditure Media placement	Transaction ID : SE084
Name of Federal Candidate: Dittmar, Jane, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Calendar Year-To-Date Per Election for Office Sought	<input type="text"/> 816574.94	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 38980.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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

/ /

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 815 Slaters Lane		Amount <input type="text"/>	
City Alexandria	State VA	Zip Code 22314	89687.50
Purpose of Expenditure Media placement		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Carroll, Morgan, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Gridiron Communications		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 3902 Portage Road Suite C #262		Amount <input type="text"/>	
City South Bend	State IN	Zip Code 46628	16979.04
Purpose of Expenditure Direct mail		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Carroll, Morgan, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

/ /

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C 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 The Prosper Group Corporation			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 01 / 2016</div>		
Mailing Address 435 E Main St Suite 250			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">31380.00</div>		
City Greenwood	State IN	Zip Code 46143			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SE087 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 27 / 2016</div>		
Name of Federal Candidate: <input type="checkbox"/> Support Nelson, Tom, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>WI</u>		
Calendar Year-To-Date Per Election for Office Sought 386648.01			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item SRCP Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 28 / 2016</div>		
Mailing Address 201 N Union St Suite 200			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">17819.00</div>		
City Alexandria	State VA	Zip Code 22314			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SE088 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 28 / 2016</div>		
Name of Federal Candidate: <input type="checkbox"/> Support Gallego, Pete, , , <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>		
Calendar Year-To-Date Per Election for Office Sought 1705203.00			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%;">49199.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100%; height: 20px;"></div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Connection Strategy	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016						
Mailing Address P.O. Box 2192	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div> Transaction ID : SE089 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Arlington</td> <td>VA</td> <td>22202</td> </tr> </table>		City	State	Zip Code	Arlington	VA	22202
City		State	Zip Code				
Arlington	VA	22202					
Purpose of Expenditure Phone calls Category/Type 004							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Gallego, Pete, , ,	Office Sought: <input checked="" type="checkbox"/> House District: <u>23</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>TX</u>						
Calendar Year-To-Date Per Election for Office Sought 1755203.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016						
Mailing Address 1911 N Fort Myer Drive Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">14996.00</div> Transaction ID : SE090 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:34%;">Zip Code</td> </tr> <tr> <td>Arlington</td> <td>VA</td> <td>22209</td> </tr> </table>		City	State	Zip Code	Arlington	VA	22209
City		State	Zip Code				
Arlington	VA	22209					
Purpose of Expenditure Media production Category/Type 004							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Nolan, Rick, , ,	Office Sought: <input checked="" type="checkbox"/> House District: <u>08</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>MN</u>						
Calendar Year-To-Date Per Election for Office Sought 4110629.05	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">64996.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 DMM Media	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016						
Mailing Address 1911 N Fort Myer Drive Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">2983.00</div> Transaction ID : SE091 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Arlington</td> <td>VA</td> <td>22209</td> </tr> </table>		City	State	Zip Code	Arlington	VA	22209
City		State	Zip Code				
Arlington	VA	22209					
Purpose of Expenditure Media production							
Name of Federal Candidate: Nolan, Rick, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						
4113612.05							

Full Name of Payee <input type="checkbox"/> Memo Item Targeted Victory	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016						
Mailing Address 1033 North Fairfax Street Suite 400	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">61500.00</div> Transaction ID : SE092 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure Media placement							
Name of Federal Candidate: Rosen, Jacky, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NV						
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						
2314533.15							

(a) SUBTOTAL of Itemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px;">64483.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>
(a) TOTAL Independent Expenditures	<div style="border: 1px solid black; padding: 2px; height: 20px;"></div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Axiom Strategies	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1251 NW Briarcliff Parkway Suite 85	Amount <input type="text"/>
City Kansas City State MO Zip Code 64116	Transaction ID : SE093
Purpose of Expenditure Direct mail Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bennett, LuAnn, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2454758.83	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Axiom Strategies	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 1251 NW Briarcliff Parkway Suite 85	Amount <input type="text"/>
City Kansas City State MO Zip Code 64116	Transaction ID : SE094
Purpose of Expenditure Direct mail Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bennett, LuAnn, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 3181080.66	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 128035.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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

/ /

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Connection Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">60000.00</div>		
City Arlington	State VA	Zip Code 22202			
Purpose of Expenditure Phone calls		Category/Type 004	Transaction ID : SE095 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Eggman, Michael, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>10</u> State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 1741610.08			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 29 / 2016		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">60000.00</div>		
City Arlington	State VA	Zip Code 22202			
Purpose of Expenditure Phone calls		Category/Type 004	Transaction ID : SE096 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Mowrer, Jim, , ,			Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: <u>03</u> State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought 1077997.58			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">120000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Scott Howell & Company			Date of Public Distribution/Dissemination 10 / 28 / 2016		
Mailing Address 3900 Willow St Suite 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">16000.00</div>		
City Dallas	State TX	Zip Code 75226			
Purpose of Expenditure Media production			Category/Type 004		
Name of Federal Candidate: Santarsiero, Steve, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">2134683.21</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy, LLC			Date of Public Distribution/Dissemination 10 / 31 / 2016		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">30000.00</div>		
City Arlington	State VA	Zip Code 22202			
Purpose of Expenditure Phone calls			Category/Type 004		
Name of Federal Candidate: Schwartz, Gale, ,			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO		
Calendar Year-To-Date Per Election for Office Sought			<div style="border: 1px solid black; padding: 2px; text-align: right;">1495757.79</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">46000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, ,

[Electronically Filed]

Date

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Connection Strategy
Mailing Address: P.O. Box 2192
City: Arlington, State: VA, Zip Code: 22202
Purpose of Expenditure: Phone calls, Category/Type: 004
Name of Federal Candidate: Dittmar, Jane, , , Support: [], Oppose: [x]
Office Sought: House [x], Senate [], President [], District: 05, State: VA
Amount: 15000.00
Transaction ID: SE099
Date of Disbursement or Obligation: 10/28/2016
Disbursement For: General [x], Primary [], Other []
Calendar Year-To-Date Per Election for Office Sought: 944123.82

Full Name of Payee: Connection Strategy
Mailing Address: P.O. Box 2192
City: Arlington, State: VA, Zip Code: 22202
Purpose of Expenditure: Phone calls, Category/Type: 004
Name of Federal Candidate: Garrett, Thomas, , , Support: [x], Oppose: []
Office Sought: House [x], Senate [], President [], District: 05, State: VA
Amount: 15000.00
Transaction ID: SE100
Date of Disbursement or Obligation: 10/28/2016
Disbursement For: General [x], Primary [], Other []
Calendar Year-To-Date Per Election for Office Sought: 959123.82

(a) SUBTOTAL of Itemized Independent Expenditures: 30000.00
(a) SUBTOTAL of Unitemized Independent Expenditures:
(a) TOTAL Independent Expenditures:

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Connection Strategy		Date of Public Distribution/Dissemination 10 / 29 / 2016	
Mailing Address P.O. Box 2192		Amount 39000.00	
City Arlington	State VA	Zip Code 22202	Transaction ID : SE101
Purpose of Expenditure Phone calls		Category/Type 004	Date of Disbursement or Obligation 10 / 28 / 2016
Name of Federal Candidate: Carroll, Morgan, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>06</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CO</u>
Calendar Year-To-Date Per Election for Office Sought 1342025.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <input type="checkbox"/> Memo Item Political Ink		Date of Public Distribution/Dissemination 10 / 27 / 2016	
Mailing Address 1220 19th Street NW Suite 502		Amount 10582.90	
City Washington	State DC	Zip Code 20036	Transaction ID : SE102
Purpose of Expenditure Direct mail		Category/Type 004	Date of Disbursement or Obligation 10 / 28 / 2016
Name of Federal Candidate: Smucker, Lloyd, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>16</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought 21165.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures ▶	49582.90
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	0.00
(a) TOTAL Independent Expenditures ▶	49582.90

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Crosby, Caleb, , ,

[Electronically Filed]

Date

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Political Ink	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 28 / 2016</div>			
Mailing Address 1220 19th Street NW Suite 502	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">12543.48</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Washington</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State DC</td> <td style="padding: 2px;">Zip Code 20036</td> </tr> </table>		City Washington	State DC	Zip Code 20036
City Washington		State DC	Zip Code 20036	
Purpose of Expenditure Direct mail				
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Hartman, Christina, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 16 State: PA			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">33709.28</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item Political Ink	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 28 / 2016</div>			
Mailing Address 1220 19th Street NW Suite 502	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">10582.90</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; border-right: 1px solid black; padding: 2px;">City Washington</td> <td style="width:17%; border-right: 1px solid black; padding: 2px;">State DC</td> <td style="padding: 2px;">Zip Code 20036</td> </tr> </table>		City Washington	State DC	Zip Code 20036
City Washington		State DC	Zip Code 20036	
Purpose of Expenditure Direct mail				
Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Smucker, Lloyd, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 16 State: PA			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">44292.18</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;">23126.38</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Political Ink		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1220 19th Street NW Suite 502				Amount <input type="text"/>	
City Washington	State DC	Zip Code 20036		Transaction ID : SE105	
Purpose of Expenditure Direct mail		Category/Type <input type="text"/>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Hartman, Christina, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>16</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Political Ink		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1220 19th Street NW Suite 502				Amount <input type="text"/>	
City Washington	State DC	Zip Code 20036		Transaction ID : SE106	
Purpose of Expenditure Direct mail		Category/Type <input type="text"/>		Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>	
Name of Federal Candidate: Smucker, Lloyd, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <u>16</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>PA</u>	
Calendar Year-To-Date Per Election for Office Sought		<input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	▶	<input type="text"/>	23126.38
(a) SUBTOTAL of Unitemized Independent Expenditures	▶	<input type="text"/>	
(a) TOTAL Independent Expenditures	▶	<input type="text"/>	

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

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Political Ink	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016						
Mailing Address 1220 19th Street NW Suite 502	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12543.48</div> Transaction ID : SE107 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20036</td> </tr> </table>		City	State	Zip Code	Washington	DC	20036
City		State	Zip Code				
Washington	DC	20036					
Purpose of Expenditure Direct mail							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Hartman, Christina, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 16 State: PA						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">79962.04</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item Political Ink	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016						
Mailing Address 1220 19th Street NW Suite 502	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">12543.48</div> Transaction ID : SE108 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 28 / 2016						
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Washington</td> <td>DC</td> <td>20036</td> </tr> </table>		City	State	Zip Code	Washington	DC	20036
City		State	Zip Code				
Washington	DC	20036					
Purpose of Expenditure Direct mail							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Hartman, Christina, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 16 State: PA						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">92505.52</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">25086.96</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

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Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px;"> / / 50000.00 </div>		
City Arlington	State VA	Zip Code 22202	Transaction ID : SE109 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>		
Purpose of Expenditure Phone calls		Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Vernon, Monica, , ,		
Name of Federal Candidate: Vernon, Monica, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 01 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA	Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> / / 50000.00 </div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name of Payee <input type="checkbox"/> Memo Item Strategic Perception			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>		
Mailing Address 6158 Mulholland Highway			Amount <div style="border: 1px solid black; padding: 2px;"> / / 28327.57 </div>		
City Hollywood	State CA	Zip Code 90068	Transaction ID : SE110 Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>		
Purpose of Expenditure Media production		Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Sidie, Jay, , ,		
Name of Federal Candidate: Sidie, Jay, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS	Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> / / 58346.46 </div>		
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y </div>		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> / / 78327.57 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> / / </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px;"> / / </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

 / / 12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Strategic Partners & Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 28 / 2016		
Mailing Address 1851A McGuckian Street			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">19794.15</div>		
City Annapolis	State MD	Zip Code 21401			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SE111 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 29 / 2016		
Name of Federal Candidate: Owens, Doug, , , <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: 04 State: UT		
Calendar Year-To-Date Per Election for Office Sought 19794.15			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Gridiron Communications			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 3902 Portage Road Suite C #262			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10961.00</div>		
City South Bend	State IN	Zip Code 46628			
Purpose of Expenditure Direct mail		Category/Type 004	Transaction ID : SE112 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
Name of Federal Candidate: Throne-Holst, Anna, , , <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: 01 State: NY		
Calendar Year-To-Date Per Election for Office Sought 841642.49			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">30755.15</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Gridiron Communications		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 3902 Portage Road Suite C #262		Amount <input type="text"/>	
City South Bend	State IN	Zip Code 46628	Transaction ID : SE113
Purpose of Expenditure Direct mail		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Throne-Holst, Anna, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 2192		Amount <input type="text"/>	
City Arlington	State VA	Zip Code 22202	Transaction ID : SE114
Purpose of Expenditure Phone calls		Category/ Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Zeldin, Lee, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

/ /

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee Gridiron Communications
Mailing Address 3902 Portage Road Suite C #262
City South Bend State IN Zip Code 46628
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House District: 18 State: FL
Calendar Year-To-Date Per Election for Office Sought 2730407.82
Disbursement For: General 2016

Full Name of Payee Gridiron Communications
Mailing Address 3902 Portage Road Suite C #262
City South Bend State IN Zip Code 46628
Purpose of Expenditure Direct mail Category/Type 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House District: 18 State: FL
Calendar Year-To-Date Per Election for Office Sought 2746765.77
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 29080.80
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Scott Howell & Company			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Mailing Address 3900 Willow St Suite 200			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 18000.00 </div>		
City Dallas	State TX	Zip Code 75226	Transaction ID : SE117 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
Purpose of Expenditure Media production		Category/ Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Perkins, Randy, , ,		
Name of Federal Candidate: Perkins, Randy, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>18</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"> 3211247.26 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 15009.45 </div>		
City Arlington	State VA	Zip Code 22202	Transaction ID : SE118 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
Purpose of Expenditure Phone calls		Category/ Type 004	Name of Federal Candidate: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Yoder, Kevin, , ,		
Name of Federal Candidate: Yoder, Kevin, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>KS</u>		
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;"> 15009.45 </div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 33009.45 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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, , ,

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Date

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 12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Connection Strategy			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 27 / 2016		
Mailing Address P.O. Box 2192			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">15009.44</div>		
City Arlington	State VA	Zip Code 22202			
Purpose of Expenditure Phone calls		Category/Type 004	Transaction ID : SE119 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
Name of Federal Candidate: Sidie, Jay, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS		
Calendar Year-To-Date Per Election for Office Sought 30018.89			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item Gridiron Communications			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
Mailing Address 3902 Portage Road Suite C #262			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">20185.56</div>		
City South Bend	State IN	Zip Code 46628			
Purpose of Expenditure Direct mail		Category/Type 004	Transaction ID : SE120 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016		
Name of Federal Candidate: Sidie, Jay, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS		
Calendar Year-To-Date Per Election for Office Sought 745190.66			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">35195.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Crosby, Caleb, , ,

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12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Gridiron Communications	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3902 Portage Road Suite C #262	Amount <input type="text"/>
City South Bend State IN Zip Code 46628	Transaction ID : SE121
Purpose of Expenditure Direct mail Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Sidie, Jay, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 795376.22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Connection Strategy	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. Box 2192	Amount <input type="text"/>
City Arlington State VA Zip Code 22202	Transaction ID : SE122
Purpose of Expenditure Phone calls Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bennett, LuAnn, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 3097107.25	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 33929.98
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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, , ,

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Connection Strategy
Mailing Address: P.O. Box 2192
City: Arlington, VA, Zip Code: 22202
Purpose of Expenditure: Phone calls
Category/Type: 004
Name of Federal Candidate: Comstock, Barbara, Support
Office Sought: House, District: 10, State: VA
Amount: 13744.41
Transaction ID: SE123
Date of Disbursement or Obligation: 10/31/2016
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 3110851.66

Full Name of Payee: DMM Media
Mailing Address: 1911 N Fort Myer Drive, Suite 400
City: Arlington, VA, Zip Code: 22209
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, Oppose
Office Sought: House, District: 03, State: IA
Amount: 14983.54
Transaction ID: SE124
Date of Disbursement or Obligation: 10/31/2016
Disbursement For: General
Calendar Year-To-Date Per Election for Office Sought: 1658107.17

(a) SUBTOTAL of Itemized Independent Expenditures: 28727.95
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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, , ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: DMM Media
Mailing Address: 1911 N Fort Myer Drive, Suite 400, Arlington, VA 22209
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, , ,
Office Sought: House, District: 03, State: IA
Amount: 2929.78
Transaction ID: SE125
Date of Disbursement or Obligation: 10/31/2016
Disbursement For: General 2016

Full Name of Payee: Something Else Strategies
Mailing Address: 212 Golden Willow Ct, Easley, SC 29642
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Ashford, Brad, , ,
Office Sought: House, District: 02, State: NE
Amount: 15000.00
Transaction ID: SE126
Date of Disbursement or Obligation: 10/31/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 17929.78
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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, , ,

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Something Else Strategies	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 212 Golden Willow Ct	Amount <input type="text"/>
City Easley State SC Zip Code 29642	Transaction ID : SE127
Purpose of Expenditure Media production Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Ashford, Brad, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1127717.39	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Honold Communications	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 252 9th Street NE	Amount <input type="text"/>
City Washington State DC Zip Code 20002	Transaction ID : SE128
Purpose of Expenditure Media production Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Derrick, Mike, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 379697.58	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 37613.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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, , ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Scott Howell & Company
Mailing Address: 3900 Willow St, Suite 200, Dallas, TX 75226
Purpose of Expenditure: Media production
Category/Type: 004
Date of Public Distribution/Dissemination: 11/01/2016
Amount: 16000.00
Transaction ID: SE129
Date of Disbursement or Obligation: 10/31/2016
Name of Federal Candidate: Cain, Emily, Support/Oppose
Office Sought: House, District: 02, State: ME
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 1032466.22

Full Name of Payee: Gridiron Communications
Mailing Address: 3902 Portage Road, Suite C #262, South Bend, IN 46628
Purpose of Expenditure: Direct mail
Category/Type: 004
Date of Public Distribution/Dissemination: 11/02/2016
Amount: 21057.12
Transaction ID: SE130
Date of Disbursement or Obligation: 10/31/2016
Name of Federal Candidate: Carroll, Morgan, Support/Oppose
Office Sought: House, District: 06, State: CO
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 1380061.38

(a) SUBTOTAL of Itemized Independent Expenditures: 37057.12
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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, , ,

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Gridiron Communications			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 03 / 2016
Mailing Address 3902 Portage Road Suite C #262			Amount 21057.12
City South Bend	State IN	Zip Code 46628	Transaction ID : SE131 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016
Purpose of Expenditure Direct mail		Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Carroll, Morgan, , ,
Name of Federal Candidate: Carroll, Morgan, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 06 State: CO	Calendar Year-To-Date Per Election for Office Sought 140118.50
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016
Mailing Address 1911 N Fort Myer Drive Suite 400			Amount 14770.78
City Arlington	State VA	Zip Code 22209	Transaction ID : SE132 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 31 / 2016
Purpose of Expenditure Media production		Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Nelson, Tom, , ,
Name of Federal Candidate: Nelson, Tom, , ,		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 08 State: WI	Calendar Year-To-Date Per Election for Office Sought 704099.54
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	35827.90
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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Crosby, Caleb, , ,

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 12 / 08 / 2016

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: DMM Media
Mailing Address: 1911 N Fort Myer Drive, Suite 400, Arlington, VA 22209
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Nelson, Tom, , , Support/Oppose
Office Sought: House, District: 08, State: WI
Disbursement For: General 2016
Amount: 2970.23
Transaction ID: SE133
Date of Disbursement or Obligation: 10/31/2016
Calendar Year-To-Date Per Election for Office Sought: 707069.77

Full Name of Payee: Something Else Strategies
Mailing Address: 212 Golden Willow Ct, Easley, SC 29642
Purpose of Expenditure: Media production
Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, , , Support/Oppose
Office Sought: House, District: 19, State: NY
Disbursement For: General 2016
Amount: 21900.00
Transaction ID: SE134
Date of Disbursement or Obligation: 11/01/2016
Calendar Year-To-Date Per Election for Office Sought: 3668614.40

(a) SUBTOTAL of Itemized Independent Expenditures 24870.23
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892
City: Charleston, State: SC, Zip Code: 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House, District: 18, State: FL
Amount: 20000.00
Transaction ID: SE135
Date of Disbursement or Obligation: 11/01/2016
Disbursement For: General 2016

Full Name of Payee: Gridiron Communications
Mailing Address: 3902 Portage Road, Suite C #262
City: South Bend, State: IN, Zip Code: 46628
Purpose of Expenditure: Direct mail
Category/Type: 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House, District: 18, State: FL
Amount: 16357.95
Transaction ID: SE136
Date of Disbursement or Obligation: 11/01/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 36357.95
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 The Prosper Group Corporation			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016		
Mailing Address 435 E Main St Suite 250			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 30000.00 </div>		
City Greenwood	State IN	Zip Code 46143			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SE137 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Name of Federal Candidate: Sidie, Jay, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS		
Calendar Year-To-Date Per Election for Office Sought 775190.66			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Mailing Address 815 Slaters Lane			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1398786.88 </div>		
City Alexandria	State VA	Zip Code 22314			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SE138 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Name of Federal Candidate: Eggman, Michael, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA		
Calendar Year-To-Date Per Election for Office Sought 3140396.96			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 1428786.88 </div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y </div>

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Crosby, Caleb, , , **[Electronically Filed]** Date M M / D D / Y Y Y Y Y Y
12 / 08 / 2016
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**SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES**

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 815 Slaters Lane	Amount <input type="text"/>
City Alexandria State VA Zip Code 22314	Transaction ID : SE139
Purpose of Expenditure Media placement Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Eggman, Michael, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Honold Communications	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 252 9th Street NE	Amount <input type="text"/>
City Washington State DC Zip Code 20002	Transaction ID : SE140
Purpose of Expenditure Media production Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Eggman, Michael, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

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NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 The Prosper Group Corporation			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Mailing Address 435 E Main St Suite 250			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">47040.00</div>		
City Greenwood	State IN	Zip Code 46143			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SE141 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Eggman, Michael, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>		
Calendar Year-To-Date Per Election for Office Sought 3280986.96			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item DMM Media			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Mailing Address 1911 N Fort Myer Drive Suite 400			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">24838.77</div>		
City Arlington	State VA	Zip Code 22209			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SE142 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Mowrer, Jim, , ,			Office Sought: <input checked="" type="checkbox"/> House District: <u>03</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought 1685875.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">71878.77</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item The Strawn Company			Date of Public Distribution/Dissemination 11 / 01 / 2016		
Mailing Address P.O. Box 8399			Amount 5000.00		
City Des Moines	State IA	Zip Code 50301			
Purpose of Expenditure Media production		Category/Type 004	Transaction ID : SE143 Date of Disbursement or Obligation 11 / 01 / 2016		
Name of Federal Candidate: Mowrer, Jim, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought 1690875.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation			Date of Public Distribution/Dissemination 11 / 01 / 2016		
Mailing Address 435 E Main St Suite 250			Amount 40000.00		
City Greenwood	State IN	Zip Code 46143			
Purpose of Expenditure Media placement		Category/Type 004	Transaction ID : SE144 Date of Disbursement or Obligation 11 / 01 / 2016		
Name of Federal Candidate: Mowrer, Jim, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose			Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: IA		
Calendar Year-To-Date Per Election for Office Sought 1730875.72			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	45000.00
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892
City: Charleston, State: SC, Zip Code: 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Ashford, Brad, , ,
Office Sought: House, District: 02, State: NE
Amount: 50000.00
Transaction ID: SE145
Date of Disbursement or Obligation: 11/01/2016
Disbursement For: General 2016

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892
City: Charleston, State: SC, Zip Code: 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Santarsiero, Steve, , ,
Office Sought: House, District: 08, State: PA
Amount: 20000.00
Transaction ID: SE146
Date of Disbursement or Obligation: 11/01/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 70000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Push Digital <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. Box 21892	Amount <input type="text"/>
City Charleston State SC Zip Code 29413	Transaction ID : SE147
Purpose of Expenditure Media placement Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Schwartz, Gale, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 03 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CO
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1505757.79	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee The Prosper Group Corporation <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 435 E Main St Suite 250	Amount <input type="text"/>
City Greenwood State IN Zip Code 46143	Transaction ID : SE148
Purpose of Expenditure Media placement Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Garcia, Joe, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 26 <input type="checkbox"/> President <input type="checkbox"/> Senate State: FL
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1305862.98	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 39400.00
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 / /

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Dittmar, Jane, , ,
Office Sought: House, District: 05, State: VA
Amount: 50000.00
Transaction ID: SE149
Date of Disbursement or Obligation: 11/01/2016
Disbursement For: General 2016

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892, Charleston, SC 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House, District: 19, State: NY
Amount: 20000.00
Transaction ID: SE150
Date of Disbursement or Obligation: 11/02/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 70000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item Gridiron Communications	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 3902 Portage Road Suite C #262	Amount <input type="text"/>
City South Bend State IN Zip Code 46628	Transaction ID : SE151
Purpose of Expenditure Direct mail Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Throne-Holst, Anna, , , <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: NY
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 856437.57	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 815 Slaters Lane	Amount <input type="text"/>
City Alexandria State VA Zip Code 22314	Transaction ID : SE152
Purpose of Expenditure Media placement Category/Type 004	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Bennett, LuAnn, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 10 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 3443628.66	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 277343.08
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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

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Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 American Media & Advocacy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016						
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">87548.00</div> Transaction ID : SE153 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 02 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure Media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Mowrer, Jim, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 03 State: IA						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1818423.72</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 02 / 2016						
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">65616.25</div> Transaction ID : SE154 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 11 / 02 / 2016						
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Alexandria</td> <td>VA</td> <td>22314</td> </tr> </table>		City	State	Zip Code	Alexandria	VA	22314
City		State	Zip Code				
Alexandria	VA	22314					
Purpose of Expenditure Media placement							
Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Ashford, Brad, , ,	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate District: 02 State: NE						
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">1243333.64</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶						

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">153164.25</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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, , ,
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Date M M / D D / Y Y Y Y Y Y 12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 02 / 2016
Mailing Address 815 Slaters Lane	Amount <input type="text"/> 323810.00 Transaction ID : SE155 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 02 / 2016
City Alexandria State VA Zip Code 22314	
Purpose of Expenditure Media placement Category/Type 004	
Name of Federal Candidate: Santarsiero, Steve, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 2458493.21	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <input type="checkbox"/> Memo Item Craig Miller Productions	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 01 / 2016
Mailing Address 1491 Northside Dr. Suite B	Amount <input type="text"/> 19071.31 Transaction ID : SE156 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/> 11 / 02 / 2016
City Atlanta State GA Zip Code 30318	
Purpose of Expenditure Media production Category/Type 004	
Name of Federal Candidate: Dittmar, Jane, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 05 <input type="checkbox"/> President <input type="checkbox"/> Senate State: VA
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 455643.85	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 342881.31
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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, , ,

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Date

/ /
12 / 08 / 2016

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: American Media & Advocacy Group
Mailing Address: 815 Slaters Lane
City: Alexandria, State: VA, Zip Code: 22314
Purpose of Expenditure: Media placement, Category/Type: 004
Name of Federal Candidate: Dittmar, Jane, , , Support: [], Oppose: [x]
Office Sought: [x] House, District: 05, State: VA
Amount: 87548.88
Transaction ID: SE157
Date of Disbursement or Obligation: 11/02/2016
Disbursement For: [] Primary, [x] General 2016

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250
City: Greenwood, State: IN, Zip Code: 46143
Purpose of Expenditure: Media placement, Category/Type: 004
Name of Federal Candidate: Huerta, Emilio, , , Support: [], Oppose: [x]
Office Sought: [x] House, District: 21, State: CA
Amount: 30000.00
Transaction ID: SE158
Date of Disbursement or Obligation: 11/02/2016
Disbursement For: [] Primary, [x] General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 117548.88
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation			Date of Public Distribution/Dissemination 11 / 04 / 2016
Mailing Address 435 E Main St Suite 250			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</div> Transaction ID : SE159 Date of Disbursement or Obligation 11 / 03 / 2016
City Greenwood	State IN	Zip Code 46143	
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Bennett, LuAnn, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>VA</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">3468628.66</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation			Date of Public Distribution/Dissemination 11 / 03 / 2016
Mailing Address 435 E Main St Suite 250			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</div> Transaction ID : SE160 Date of Disbursement or Obligation 11 / 03 / 2016
City Greenwood	State IN	Zip Code 46143	
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Eggman, Michael, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>10</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">3305986.96</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">50000.00</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </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

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Mowrer, Jim, , ,
Office Sought: House, District: 03, State: IA
Amount: 25000.00
Transaction ID: SE161
Date of Disbursement or Obligation: 11/03/2016
Disbursement For: General 2016

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892, Charleston, SC 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Santarsiero, Steve, , ,
Office Sought: House, District: 08, State: PA
Amount: 25000.00
Transaction ID: SE162
Date of Disbursement or Obligation: 11/03/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures: 50000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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, , ,

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12 / 08 / 2016

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
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FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Dittmar, Jane, , ,
Office Sought: House, District: 05, State: VA
Amount: 25000.00
Transaction ID: SE163
Date of Disbursement or Obligation: 11/03/2016
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 929123.82

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892, Charleston, SC 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Carroll, Morgan, , ,
Office Sought: House, District: 06, State: CO
Amount: 60000.00
Transaction ID: SE164
Date of Disbursement or Obligation: 11/03/2016
Disbursement For: General 2016
Calendar Year-To-Date Per Election for Office Sought: 1461118.50

(a) SUBTOTAL of Itemized Independent Expenditures 85000.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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

12 / 08 / 2016

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892
City: Charleston, State: SC, Zip Code: 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Teachout, Zephyr, , ,
Office Sought: House, District: 19, State: NY
Amount: 6250.00
Transaction ID: SE165
Date of Disbursement or Obligation: 11/08/2016
Calendar Year-To-Date Per Election for Office Sought: 3718935.99
Disbursement For: General 2016

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892
City: Charleston, State: SC, Zip Code: 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Perkins, Randy, , ,
Office Sought: House, District: 18, State: FL
Amount: 6250.00
Transaction ID: SE166
Date of Disbursement or Obligation: 11/08/2016
Calendar Year-To-Date Per Election for Office Sought: 3253855.21
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 12500.00
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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Date

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Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Push Digital <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address P.O. Box 21892	Amount <input type="text"/>
City Charleston State SC Zip Code 29413	
Purpose of Expenditure Media placement Category/Type 004	Transaction ID : SE167 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Gallego, Pete, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 23 <input type="checkbox"/> President <input type="checkbox"/> Senate State: TX
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 1761453.00	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee The Prosper Group Corporation <input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>
Mailing Address 435 E Main St Suite 250	Amount <input type="text"/>
City Greenwood State IN Zip Code 46143	
Purpose of Expenditure Media placement Category/Type 004	Transaction ID : SE168 Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Nolan, Rick, , , <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: MN
Calendar Year-To-Date Per Election for Office Sought <input type="text"/> 4122049.55	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/> 14687.50
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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 / /
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee: The Prosper Group Corporation
Mailing Address: 435 E Main St, Suite 250, Greenwood, IN 46143
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Bennett, LuAnn, , ,
Office Sought: House, District: 10, State: VA
Amount: 8437.50
Transaction ID: SE169
Date of Disbursement or Obligation: 11/08/2016
Disbursement For: General 2016

Full Name of Payee: Push Digital
Mailing Address: P.O. Box 21892, Charleston, SC 29413
Purpose of Expenditure: Media placement
Category/Type: 004
Name of Federal Candidate: Santarsiero, Steve, , ,
Office Sought: House, District: 08, State: PA
Amount: 6250.00
Transaction ID: SE170
Date of Disbursement or Obligation: 11/08/2016
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 14687.50
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee <input type="checkbox"/> Memo Item The Prosper Group Corporation		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 435 E Main St Suite 250		Amount <input type="text"/>	
City Greenwood	State IN	Zip Code 46143	Transaction ID : SE171
Purpose of Expenditure Media placement		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Garcia, Joe, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>26</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>FL</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address P.O. Box 21892		Amount <input type="text"/>	
City Charleston	State SC	Zip Code 29413	Transaction ID : SE172
Purpose of Expenditure Media placement		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Throne-Holst, Anna, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
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Check if 24-hour report 48-hour report New report Amends report filed on / /

Full Name of Payee Conston Communications <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 1758 U St. NW Unit 3		Amount <input type="text"/>	
City Washington	State DC	Zip Code 20009	Transaction ID : SE173
Purpose of Expenditure Media production		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Throne-Holst, Anna, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>01</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Cold Spark Media <input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <input type="text"/> / <input type="text"/> / <input type="text"/>	
Mailing Address 307 Fourth Ave. Suite 920		Amount <input type="text"/>	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : SE174
Purpose of Expenditure Direct mail		Category/Type <input type="text"/>	Date of Disbursement or Obligation <input type="text"/> / <input type="text"/> / <input type="text"/>
Name of Federal Candidate: Teachout, Zephyr, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <u>19</u> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <u>NY</u>
Calendar Year-To-Date Per Election for Office Sought <input type="text"/>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures	<input type="text"/>
(a) SUBTOTAL of Unitemized Independent Expenditures	<input type="text"/>
(a) TOTAL Independent Expenditures	<input type="text"/>

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Crosby, Caleb, , ,

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund
FEC IDENTIFICATION NUMBER
C C00504530

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

Full Name of Payee Targeted Victory
Mailing Address 1033 North Fairfax Street Suite 400
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Media placement Category/Type 004
Date of Public Distribution/Dissemination 10/22/2016
Amount 54100.00
Transaction ID: SE175
Date of Disbursement or Obligation 10/18/2016
Name of Federal Candidate: Rosen, Jacky, , ,
Office Sought: House District: 03 State: NV
Disbursement For: General 2016

Full Name of Payee American Media & Advocacy Group
Mailing Address 815 Slaters Lane
City Alexandria State VA Zip Code 22314
Purpose of Expenditure Media placement Category/Type 004
Date of Public Distribution/Dissemination 10/25/2016
Amount 332505.86
Transaction ID: SE176
Date of Disbursement or Obligation 10/14/2016
Name of Federal Candidate: Mowrer, Jim, , ,
Office Sought: House District: 03 State: IA
Disbursement For: General 2016

(a) SUBTOTAL of Itemized Independent Expenditures 386605.86
(a) SUBTOTAL of Unitemized Independent Expenditures
(a) TOTAL Independent Expenditures

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Crosby, Caleb, , ,

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12 / 08 / 2016

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 American Media & Advocacy Group			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016		
Mailing Address 815 Slaters Lane			Amount 333865.86		
City Alexandria	State VA	Zip Code 22314	Transaction ID : SE177 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 14 / 2016		
Purpose of Expenditure Media placement		Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Mowrer, Jim, , ,		
Name of Federal Candidate: Mowrer, Jim, , ,		<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: <u>03</u> State: <u>IA</u>		
Calendar Year-To-Date Per Election for Office Sought 1643123.63		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

Full Name of Payee <input type="checkbox"/> Memo Item Push Digital			Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 21 / 2016		
Mailing Address P.O. Box 21892			Amount 50000.00		
City Charleston	State SC	Zip Code 29413	Transaction ID : SE178 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 17 / 2016		
Purpose of Expenditure Media placement		Category/Type 004	Name of Federal Candidate: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Schwartz, Gale, , ,		
Name of Federal Candidate: Schwartz, Gale, , ,		<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: <u>03</u> State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought 50000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	383865.86
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	
(a) TOTAL Independent Expenditures ▶	

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 American Media & Advocacy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 21 / 2016</div>			
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1073876.16</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure Media placement	Category/Type 004			
Name of Federal Candidate: Schwartz, Gale, , ,	<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: <u>03</u> State: <u>CO</u>		
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1123876.16</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

Full Name of Payee <input type="checkbox"/> Memo Item American Media & Advocacy Group	Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 25 / 2016</div>			
Mailing Address 815 Slaters Lane	Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1165688.56</div>			
<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; padding: 2px;">City Alexandria</td> <td style="width:17%; padding: 2px;">State VA</td> <td style="width:50%; padding: 2px;">Zip Code 22314</td> </tr> </table>		City Alexandria	State VA	Zip Code 22314
City Alexandria		State VA	Zip Code 22314	
Purpose of Expenditure Media placement	Category/Type 004			
Name of Federal Candidate: Garcia, Joe, , ,	<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: <u>26</u> State: <u>FL</u>		
Calendar Year-To-Date Per Election for Office Sought	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">1166051.90</div>	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;">2239564.72</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 150px;"> </div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

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

12 / 08 / 2016

Signature

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C 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 Push Digital		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 11 / 01 / 2016	
Mailing Address P.O. Box 21892		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25000.00</div>	
City Charleston	State SC	Zip Code 29413	Transaction ID : SE181 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016
Purpose of Expenditure Media placement		Category/Type 004	
Name of Federal Candidate: Perkins, Randy, , ,		<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: 18 State: FL	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">2771765.77</div>			

Full Name of Payee <input type="checkbox"/> Memo Item Cold Spark Media		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y 10 / 26 / 2016	
Mailing Address 307 Fourth Ave. Suite 920		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">17498.56</div>	
City Pittsburgh	State PA	Zip Code 15222	Transaction ID : SE182 Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y 10 / 19 / 2016
Purpose of Expenditure Direct mail		Category/Type 004	
Name of Federal Candidate: Teachout, Zephyr, , ,		<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: 19 State: NY	
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	
<div style="border: 1px solid black; padding: 2px; text-align: right;">3558640.33</div>			

(a) SUBTOTAL of Itemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">42498.56</div>
(a) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(a) TOTAL Independent Expenditures ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">19788392.40</div>

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Crosby, Caleb, , ,

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
12 / 08 / 2016

Signature