10/02/2018 16 : 42

## Image# 201810029124275556 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)		JITONES		PAGE 1 OF 1 FOR SE OF FORM 24/48
			FEC I	DENTIFICATION NUMBER V
Congressional Leadership Fur	id		C	C00504530
Check if 24-hour report 🗶 48-hour r	eport 🗶 New re	port Amends rep	ort filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date of Publ	ic Distribution/Dissemination
Nebo Media			M M 09	/ D D / Y Y Y Y 30 2018
Mailing Address PO Box 9825			Amount	
City	State	Zip Code		324390.79
Arlington	VA	22219	Transaction	ID : 001
Purpose of Expenditure Media Placement		Category/ Type 004	M - M	vursement or Obligation
Name of Federal Candidate		Support	Office Sought:	★ House District: 03
Davids, Sharice, , ,		× Oppose	President	Senate State: KS
Calendar Year-To-Date Per Election for Office Sought		2319860.22	Disbursement For: 2018 Other (s	Primary Seneral
Full Name of Payee			Date of Pub	lic Distribution/Dissemination
FP1 Strategies			M M 09	/ D D / Y Y Y Y 30 2018
Mailing Address 3001 Washington Blvd	I, 7th Floor			
			Amount	
City	State	Zip Code		17040.00
Arlington	VA	22201	Transaction Date of Dist	ID: 002 pursement or Obligation
Purpose of Expenditure Media Production		Category/ Type 004	<sup>M</sup> 10	/ D D / Y Y Y Y 01 2018
Name of Federal Candidate		Support	Office Sought:	X House District: 03
Davids, Sharice, , ,		X Oppose	President	Senate State: KS
Calendar Year-To-Date			Disbursement For:	Primary X General
Per Election for Office Sought		2336900.22	2018 Other (s	specify) ►
(a) SUBTOTAL of Itemized Independent E	Expenditures			341430.79
(b) SUBTOTAL of Unitemized Independer	It Expenditures			· · · · · · · ·
(c) TOTAL Independent Expenditures				
			••••	341430.79
Under penalty of perjury I certify that the with, or at the request or suggestion of, a party committee) any political party comm	ny candidate or authorize			
Crosby, Caleb, , ,			M M / D I	
Signature	[Electro	<i>mically Filed]</i> Dat	e 10 02	2018