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

Sch	nedule E)		PAGE 1 OF 2 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Cc	ongressional Leadership Fund		C C00504530		
Check if 24-hour report					
ŀ	Full Name of Payee Nebo Media		Date of Public Distribution/Dissemination		
L			09 27 2018		
	Mailing Address PO Box 9825		Amount		
-	City State	Zip Code	35664.81		
ı	Arlington VA	22219	Transaction ID: 001 Date of Disbursement or Obligation		
	Purpose of Expenditure Media Placement	Category/ Type 004	09 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
h	Name of Federal Candidate	Support	Office Sought:		
ı	Spanberger, Abigail, , ,	X Oppose	President Senate State: VA		
	Calendar Year-To-Date Per Election for Office Sought	859137.81	Disbursement For: Primary General 2018 Gher (specify) ▶		
Γ	Full Name of Payee		Date of Public Distribution/Dissemination		
ı	FP1 Strategies		09 27 Y Y Y Y Y		
	Mailing Address 3001 Washington Blvd, 7th Floor		Amount		
ŀ	City State	Zip Code	17360.00		
	Arlington VA	22201	Transaction ID : 002 Date of Disbursement or Obligation		
	Purpose of Expenditure Media Production	Category/ Type 004	09 / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
ı	Name of Federal Candidate	Support	Office Sought: House District: 07		
	Spanberger, Abigail, , ,	X Oppose	President Senate State: VA		
	Calendar Year-To-Date Per Election for Office Sought	876497.81	Disbursement For: Primary 2018 Other (specify) Other (speci		
(a) SUBTOTAL of Itemized Independent Expenditures 53024.81					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(0	c) 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.					
		nically Filed] Date	09		
	Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Sch	edule E)	BITOTIES	PAGE 2 OF 2 FOR SE OF FORM 24/48		
NAM	FEC IDENTIFICATION NUMBER ▼				
Co	ngressional Leadership Fund	C C00504530			
Check if 24-hour report					
TF	Full Name of Payee		Date of Public Distribution/Dissemination		
	FP1 Strategies		09 27 2018		
N	Mailing Address 3001 Washington Blvd, 7th Floor		Amount		
	Dity State	Zip Code	2000.00		
- 1	Arlington VA	22201	Transaction ID: 003 Date of Disbursement or Obligation		
	Purpose of Expenditure Media Production	Category/ Type 004	09 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
1	Name of Federal Candidate	Support	Office Sought: X House District: 07		
	Spanberger, Abigail, , ,	X Oppose	President Senate State: VA		
L	Calendar Year-To-Date Per Election for Office Sought	878497.81	Disbursement For: Primary General 2018 Other (specify) ▶		
F	Full Name of Payee		Date of Public Distribution/Dissemination		
1	Mailing Address		Amount		
(City State	Zip Code			
			Date of Disbursement or Obligation		
F	Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y		
1	Name of Federal Candidate	Support	Office Sought: House District:		
\vdash	Calendar Year-To-Date	Oppose	President Senate State: Disbursement For: Primary General		
	Per Election for Office Sought		Other (specify) ▶		
(a) SUBTOTAL of Itemized Independent Expenditures					
(b) SUBTOTAL of Unitemized Independent Expenditures					
(с) TOTAL Independent Expenditures		55024.81		
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, , , [Electronic Signature]	onically Filed] Date	09 / 29 / 2018		