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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if 24-hour report 48-hour report New report Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
Nebo Media	M M / D D / Y Y Y Y
Mailing Address PO Box 9825	08 15 2018
	Amount
City State Zip Code	71602.50
Arlington VA 22219	Transaction ID : 001  Date of Disbursement or Obligation
Purpose of Expenditure Media placement  Category/ Type 004	08 / 10 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	ce Sought: X House District: 01
Bryce, Randy, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought  Distriction 171602.50	oursement For: Primary General  Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
FP1 Strategies	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1826 Jefferson PI NW	00 13 2010
	Amount
City State Zip Code	2000.00
Washington DC 20036	Transaction ID : 002
Purpose of Expenditure  Madio production  Category/  O04	Date of Disbursement or Obligation
Media production Ode Type 004	08 20 2018
Name of Federal Candidate Support Office	ce Sought: House District: 01
Bryce, Randy, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought  Dist 201	
	Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	73602.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	73602.50
Under penalty of perjury I certify that the independent expenditures reported herein were not me with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	·
Crosby, Caleb, , ,  [Electronically Filed] Date	08 17 2018
Signature	