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 filed | d on Mam / Dab / Yayayay |
| Full Name of Payee | Date of Public Distribution/Dissemination |
| Nebo Media | 09 01 2018 |
| Mailing Address PO Box 9825 | Amount |
| | |
| City State Zip Code Arlington VA 22219 | 152313.14 Transaction ID : 001 |
| | Date of Disbursement or Obligation |
| Purpose of Expenditure Media Placement Category/ Type 004 | 08 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y |
| Name of Federal Candidate Support Offic | e Sought: |
| Brindisi, Anthony, , , | President Senate State: NY |
| Calendar Year-To-Date Per Election for Office Sought Disb 2018 | ursement For: Primary General Other (specify) ▶ |
| Full Name of Payee | Date of Public Distribution/Dissemination |
| | M = M / D = D / Y = Y = Y |
| Mailing Address | |
| | Amount |
| City State Zip Code | |
| | Date of Disbursement or Obligation |
| Purpose of Expenditure Category/ Type | M = M / D = D / Y = Y = Y |
| Name of Federal Candidate Support Office | e Sought: House District: |
| Oppose | President Senate State: |
| Calendar Year-To-Date Disb | ursement For: Primary General |
| Per Election for Office Sought | Other (specify) |
| (a) SUBTOTAL of Itemized Independent Expenditures | 152313.14 |
| (b) SUBTOTAL of Unitemized Independent Expenditures | |
| (c) TOTAL Independent Expenditures | 152313.14 |
| Under penalty of perjury I certify that the independent expenditures reported herein were not m 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 | 09 03 2018 |
| Signature Date | 2010 |
| | |