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

Schedule E)	FOR SE OF FORM 24/48		
IAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Congressional Leadership Fund			
	C C00504530		
Check if X 24-hour report 48-hour report New report Amends report filed	I on May / Dab / Yayayay		
Full Name of Payee	Date of Public Distribution/Dissemination		
Nebo Media	M - M / D - D / Y - Y - Y - Y		
Mailing Address PO Box 9825	10 31 2018		
	Amount		
City State Zip Code	165970.00		
Arlington VA 22219	Transaction ID : 001 Date of Disbursement or Obligation		
Purpose of Expenditure Media Placement Category/ Type 004	10 29 / 2018		
Name of Federal Candidate Support Office	e Sought:		
Pureval, Aftab, , ,	President Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	ursement For: Primary General Other (specify) ▶		
Full Name of Payee	Date of Public Distribution/Dissemination		
Nebo Media	10 31 2018		
Mailing Address PO Box 9825	Amount		
	Allount		
City State Zip Code	165970.00		
Arlington VA 22219	Transaction ID: 002 Date of Disbursement or Obligation		
Purpose of Expenditure Media Placement Category/ Type 004	10 / 29 / Y Y Y Y Y		
Name of Federal Candidate Support Office	e Sought: 🗶 House District:01		
Chabot, Steve, , ,	President Senate State: OH		
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	ursement For: Primary General Other (specify)		
_			
(a) SUBTOTAL of Itemized Independent Expenditures	331940.00		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not mounts, 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	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Signature	2010		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	II EXI END	TIONES		PAGE 2 OF 2 FOR SE OF FORM 24/48	
IAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼	
Congressional Leadership Fund				C C00504530	
Check if X 24-hour report 48-hour report New report Amends report filed on					
Full Name of Payee			Date	of Public Distribution/Dissemination	
FP1 Strategies				10 31 2018	
Mailing Address 3001 Washington Blvd, 7th Floor			Amou	ınt	
City	State	Zip Code	— I.	8650.00	
Arlington	VA	22201		Transaction ID : 003 Date of Disbursement or Obligation	
Purpose of Expenditure Media Production		Category/ Type 004		10	
Name of Federal Candidate		Support	Office Sough	nt: X House District: 01	
Pureval, Aftab, , ,		x Oppose	Presid	ent Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought	, ,	3895946.77	Disbursemer 2018	nt For: Primary	
Full Name of Payee	-		Date	of Public Distribution/Dissemination	
FP1 Strategies			Г	10 31 2018	
Mailing Address 3001 Washington Blvd, 7th Floor	r		Amou		
City	State	Zip Code		8650.00	
Arlington	VA	22201		action ID: 004 of Disbursement or Obligation	
Purpose of Expenditure Media Production		Category/ Type 004		10 31 2018	
Name of Federal Candidate		x Support	Office Sough	ht: 🗶 House District: 01	
Chabot, Steve, , ,		Oppose	Presid	lent Senate State: OH	
Calendar Year-To-Date Per Election for Office Sought	, , ,	3904596.77	Disbursemer 2018	nt For:	
(a) SUBTOTAL of Itemized Independent Expenditur	es		• •	17300.00	
(b) SUBTOTAL of Unitemized Independent Expendi	tures		· •		
(c) TOTAL Independent Expenditures			•	349240.00	
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, , , Signature	[Electron	nically Filed] Date	11	01 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	