

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

(Schedule E)

PAGE 1 OF 4
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530	
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee Nebo Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2018	
Mailing Address PO Box 9825		Amount 130631.72	
City Arlington	State VA	Zip Code 22219	Transaction ID : 001
Purpose of Expenditure Media Placement	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2018	
Name of Federal Candidate Davis, Paul, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought 3458156.71		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Nebo Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2018	
Mailing Address PO Box 9825		Amount 130631.72	
City Arlington	State VA	Zip Code 22219	Transaction ID : 002
Purpose of Expenditure Media Placement	Category/Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 12 / 2018	
Name of Federal Candidate Watkins, Steve, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS	
Calendar Year-To-Date Per Election for Office Sought 3588788.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	261263.44
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(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.

Crosby, Caleb, , ,

[Electronically Filed]

Date

MM / DD / YYYY
10 / 19 / 2018

Signature

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	

Full Name of Payee Nebo Media		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address PO Box 9825		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 17 2018</div>	
City Arlington	State VA	Zip Code 22219	Transaction ID : 003
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>
Name of Federal Candidate Davis, Paul, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">3604028.90</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee Nebo Media		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>	
Mailing Address PO Box 9825		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10 17 2018</div>	
City Arlington	State VA	Zip Code 22219	Transaction ID : 004
Purpose of Expenditure Media Placement		Category/ Type 004	Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M / D D D / Y Y Y Y Y Y</div>
Name of Federal Candidate Watkins, Steve, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">3619269.37</div> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">30480.94</div>
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures..... ▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

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Crosby, Caleb, , ,

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin-left: 10px;"> M M M / D D D / Y Y Y Y Y Y </div>	

Full Name of Payee DMM Media		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 17 / 2018</div> </div>	
Mailing Address 1911 N. Fort Meyer Drive, Ste 400		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8606.04</div>	
City Arlington	State VA	Zip Code 22209	Transaction ID : 005 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 17 / 2018</div> </div>
Purpose of Expenditure Media Production		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate Davis, Paul, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">3627875.41</div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►	

Full Name of Payee DMM Media		Date of Public Distribution/Dissemination <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 17 / 2018</div> </div>	
Mailing Address 1911 N. Fort Meyer Drive, Ste 400		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">8606.05</div>	
City Arlington	State VA	Zip Code 22209	Transaction ID : 006 Date of Disbursement or Obligation <div style="display: flex; justify-content: space-between;"> <div style="border: 1px solid black; padding: 2px;">M M M / D D D / Y Y Y Y Y Y</div> <div style="border: 1px solid black; padding: 2px;">10 / 17 / 2018</div> </div>
Purpose of Expenditure Media Production		Category/Type <div style="border: 1px solid black; padding: 2px; text-align: center;">004</div>	
Name of Federal Candidate Watkins, Steve, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px; text-align: right;">3636481.46</div>	
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ►	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;">17212.09</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Full Name of Payee DMM Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2018	
Mailing Address 1911 N. Fort Meyer Drive, Ste 400		Amount 992.85	
City Arlington	State VA	Zip Code 22209	Transaction ID : 007
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 18 / 2018
Name of Federal Candidate Watkins, Steve, , ,		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee DMM Media		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 17 / 2018	
Mailing Address 1911 N. Fort Meyer Drive, Ste 400		Amount 992.86	
City Arlington	State VA	Zip Code 22209	Transaction ID : 008
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 10 / 18 / 2018
Name of Federal Candidate Davis, Paul, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: KS
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1985.71
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	310942.18

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