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 24-hour report	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	10 03 2018
	Amount
City State Zip Code	62992.50
Arlington VA 22219	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	10 01 / 2018
Name of Federal Candidate Support Office	e Sought: X House District: 02
Coleman, Linda, , ,	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disbut 2018	ursement For: Primary General Other (specify)
Full Name of Payee Nebo Media	Date of Public Distribution/Dissemination
	10 03 2018
Mailing Address PO Box 9825	Amount
City State Zip Code	172290.00
Arlington VA 22219	Transaction ID: 002 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ 004	09 28 2018
Type Type	
	e Sought: Nouse District: 02
Coleman, Linda, , ,	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought Disbrace 2018	orsement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	235282.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	235282.50
Under penalty of perjury I certify that the independent expenditures reported herein were not movith, 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	0 05 2018
Signature	