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

Schedule E)		PAGE 1 OF 2 FOR SE OF FORM 24/48			
IAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼					
Congressional Leadership Fund		C C00504530			
Check if 24-hour report <b>X</b> 48-hour report <b>X</b> New rep	port Amends report fil	iled on MMM / DDD / YTYTY			
Full Name of Payee  Nebo Media		Date of Public Distribution/Dissemination			
Mailing Address PO Box 9825		10 16 7 2018			
Mailing Address PO R0x 9872		Amount			
City State	Zip Code	133716.62			
Arlington VA	22219	Transaction ID: 001  Date of Disbursement or Obligation			
Purpose of Expenditure Media Placement	Category/ Type 004	10 12 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Name of Federal Candidate	Support Of	ffice Sought:   House District: 22			
Brindisi, Anthony, , ,	X Oppose	President Senate State: NY			
Calendar Year-To-Date Per Election for Office Sought		isbursement For: Primary <b>x</b> General Other (specify) ▶			
Full Name of Payee Nebo Media		Date of Public Distribution/Dissemination			
		10 16 2018			
Mailing Address PO Box 9825		Amount			
City State	Zip Code	133716.62			
Arlington VA	22219	Transaction ID: 002  Date of Disbursement or Obligation			
Purpose of Expenditure Media Placement	Category/ Type 004	10 12 7 2018			
Name of Federal Candidate	<b>x</b> Support Of	ffice Sought:    House District: 22			
Tenney, Claudia, , ,	Oppose	President Senate State: NY			
Calendar Year-To-Date Per Election for Office Sought		isbursement For:			
(a) CURTOTAL of Hamized Independent Expanditures		207422.24			
(a) SUBTOTAL of Itemized Independent Expenditures		267433.24			
(b) SUBTOTAL of Unitemized Independent Expenditures	······				
(c) TOTAL Independent Expenditures	······				
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	•			
	nically Filed] Date	10 18 2018			
Signature	_				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	II EXPEND	TI ONES	PAGE FOR:	2 OF 2 SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)				ICATION NUMBER ▼	
Congressional Leadership Fund			C C0050		
Check if 24-hour report	X New re	port Amends repo	rt filed on	D / Y = Y = Y	
Full Name of Payee FP1 Strategies			Date of Public Distril		
Mailing Address 3001 Washington Blvd, 7th Floor			10 10 10 Amount	2018	
City State Zip Code				8705.00	
Arlington	VA	22201		Transaction ID: 003 Date of Disbursement or Obligation	
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement	D / Y Y Y Y	
Name of Federal Candidate		Support	Office Sought: X Hou	se District: 22	
Brindisi, Anthony, , ,		<b>X</b> Oppose	President Sen	NV.	
Calendar Year-To-Date Per Election for Office Sought	7	3434770.43	Disbursement For: P 2018 Other (specify)	rimary <b>X</b> General	
Full Name of Payee	_		Date of Public Distri	bution/Dissemination	
FP1 Strategies			10 10	2018	
Mailing Address 3001 Washington Blvd, 7th Floo	r		Amount		
City	State	Zip Code		8705.00	
Arlington	VA	22201	2201 Transaction ID : 004 Date of Disbursement or Obligation		
Purpose of Expenditure Media Production		Category/ Type 004	10 / 10		
Name of Federal Candidate		<b>x</b> Support	Office Sought: X Hou	se District: 22	
Tenney, Claudia, , ,		Oppose	President Sen	ate State: NY	
Calendar Year-To-Date Per Election for Office Sought	7 1 7	3443475.43	Disbursement For: P 2018 Other (specify)	rimary	
(a) SUBTOTAL of Itemized Independent Expenditur	es		•	17410.00	
(b) SUBTOTAL of Unitemized Independent Expendi	itures		<b>&gt;</b>	11111	
(c) TOTAL Independent Expenditures				004040.04	
(-,			P	284843.24	
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorize				
Crosby, Caleb, , ,	[Electro	nically Filed] Date	10 18	2018	
Signature					