

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**

 PAGE 1 OF 1  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>			FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530		
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name of Payee <b>Nebo Media</b>			Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 23 / 2018</b>		
Mailing Address PO Box 9825			Amount <b>93294.30</b>		
City <b>Arlington</b>		State <b>VA</b>	Zip Code <b>22219</b>		
Purpose of Expenditure <b>Media Placement</b>		Category/Type <b>004</b>		Transaction ID : 001 Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 24 / 2018</b>	
Name of Federal Candidate <b>Pureval, Aftab, , ,</b>			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Office Sought: <input checked="" type="checkbox"/> House    District: <b>01</b> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <b>OH</b>		
Calendar Year-To-Date Per Election for Office Sought <b>3200040.77</b>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2018 <input type="checkbox"/> Other (specify) ▶		
Full Name of Payee			Date of Public Distribution/Dissemination		
Mailing Address			Amount		
City		State	Zip Code		
Purpose of Expenditure		Category/Type		Date of Disbursement or Obligation	
Name of Federal Candidate			<input type="checkbox"/> Support <input type="checkbox"/> Oppose Office Sought: <input type="checkbox"/> House    District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate    State: _____		
Calendar Year-To-Date Per Election for Office Sought			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		
<b>(a) SUBTOTAL</b> of Itemized Independent Expenditures..... ▶ <b>93294.30</b>					
<b>(b) SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶					
<b>(c) TOTAL</b> Independent Expenditures..... ▶ <b>93294.30</b>					
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.					
Signature <i>Crosby, Caleb, , ,</i>			Date <b>10 / 24 / 2018</b>		

[Electronically Filed]