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

Schedule E)	PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	
	C C00504530
Check if 24-hour report 48-hour report New report Amends report filed	i on Mam / Dab / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
Big Dog Strategies	09 30 2020
Mailing Address PO Box 217	09 30 2020 Amount
City State Zip Code	29098.12
City State Zip Code Clarence Center NY 14032	Transaction ID : SE.001 Date of Disbursement or Obligation
Purpose of Expenditure Direct mail  Category/ Type 004	09 / 24 / 2020
Name of Federal Candidate  Support  Office	e Sought: 🗶 House District: 22
Tenney, Claudia, , , Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought  Disb 2020	ursement For: Primary   General  Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
FlexPoint Media	09 30 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 1051	30 2020
	Amount
City State Zip Code	740431.98
New Albany OH 43054	Transaction ID : SE.002  Date of Disbursement or Obligation
Purpose of Expenditure Media placement  Category/ Type  004	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support Offic	e Sought: X House District: 22
Brindisi, Anthony, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought  Disb 2384048.57  Disb	
1 St. Electrical to Control Control	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	769530.10
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	7 7 7
Under penalty of perjury I certify that the independent expenditures reported herein were not m with, 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	10 02 2020
Signature	

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report 48-hour report New report Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee FlexPoint Media	Date of Public Distribution/Dissemination
Mailing Address PO Box 1051	09 30 2020 Amount
City State Zip Code New Albany OH 43054	47684.84 Transaction ID : SE.003
Purpose of Expenditure Media placement  Category/ Type 004	Date of Disbursement or Obligation  09  28  2020
Name of Federal Candidate  Support  Office  Principle Anthony	ce Sought:   House District: 22
Calcinal Teal to Bate	President Senate State: NY  oursement For: Primary General
Per Election for Office Sought 2431733.41 202  Full Name of Payee	Other (specify)   Date of Public Distribution/Dissemination
DMM Media	09 30 2020
Mailing Address 1911 N. Fort Myer Drive Suite 400	Amount
City State Zip Code Arlington VA 22209	12994.60 Transaction ID : SE.004
Purpose of Expenditure Media production  Category/ Type  004	Date of Disbursement or Obligation  M 9 29 2020
Prindici Anthony	ce Sought:   House District: 22  President State: NY
Calendar Year-To-Date Dis	bursement For: Primary  General
Per Election for Office Sought 2444728.01	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	60679.44
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	830209.54
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Crosby, Caleb, , ,  [Electronically Filed] Date	10 02 2020