

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Congressional Leadership Fund

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="87961.11"/>	<input type="text" value="87961.11"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8725265.35"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="429013.66"/>	<input type="text" value="11144146.53"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="9154279.01"/>	<input type="text" value="11232107.64"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8623188.87"/>	<input type="text" value="10701017.50"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="531090.14"/>	<input type="text" value="531090.14"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

Congressional Leadership Fund

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	324814.66	10952123.53
(ii) Unitemized	199.00	523.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	325013.66	10952646.53
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	104000.00	191500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	429013.66	11144146.53
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	429013.66	11144146.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	429013.66	11144146.53

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	752363.23	1250779.86
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	752363.23	1250779.86
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	7870825.64	9450237.64
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	8623188.87	10701017.50
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8623188.87	10701017.50

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	429013.66	11144146.53
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	429013.66	11144146.53
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	752363.23	1250779.86
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	752363.23	1250779.86

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)
A. E. M. BAKWIN

Mailing Address **0433 W US HIGHWAY 20**

City **LAPORTE** State **IN** Zip Code **46350-8609**

FEC ID number of contributing federal political committee. **C**

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25000.00**

Date of Receipt
10 / 22 / 2012
Transaction ID : SA11.113

Amount of Each Receipt this Period
25000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. MIGUEL A. FANA JR.

Mailing Address **7281 BRYCE POINT**

City **PINELLAS PARK** State **FL** Zip Code **33782-4338**

FEC ID number of contributing federal political committee. **C**

Name of Employer **SELF** Occupation **PHYSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25000.00**

Date of Receipt
10 / 26 / 2012
Transaction ID : SA11.114

Amount of Each Receipt this Period
25000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. DAVID HERRO

Mailing Address **65 E. GOETHE**

City **CHICAGO** State **IL** Zip Code **60610**

FEC ID number of contributing federal political committee. **C**

Name of Employer **HARRIS ASSOCIATES** Occupation **INVESTMENT MANAGER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **50000.00**

Date of Receipt
10 / 20 / 2012
Transaction ID : SA11.127

Amount of Each Receipt this Period
50000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ► **100000.00**

TOTAL This Period (last page this line number only)..... ►

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 52
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)
A. ROGER HERTOOG

Mailing Address 1040 5TH AVENUE, APT. 13-A

City NEW YORK State NY Zip Code 10028-0137

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2012

Transaction ID : SA11.116

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B. DOUGLAS G. SCRIVNER

Mailing Address 25461 W FREMONT RD.

City LOS ALTOS HILLS State CA Zip Code 94022-3538

FEC ID number of contributing federal political committee. **C**

Name of Employer RETIRED Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 31 / 2012

Transaction ID : SA11.121

Amount of Each Receipt this Period
15000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. MILES D. WHITE

Mailing Address 1313 N. GREEN BAY RD.

City LAKE FOREST State IL Zip Code 60045-1107

FEC ID number of contributing federal political committee. **C**

Name of Employer ABBOTT LABORATORIES Occupation CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 27 / 2012

Transaction ID : SA11.115

Amount of Each Receipt this Period
50000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ▶ 70000.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 52
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)
A. AMERICAN ACTION NETWORK

Mailing Address 555 13TH STREET NW
SUITE 510W

City WASHINGTON State DC Zip Code 20004-1164

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
233873.53

Date of Receipt
11 / 26 / 2012
Transaction ID : SA11.128

Amount of Each Receipt this Period
39814.66

CONTRIBUTION IN KIND-PAYROLL/OFFICE SPACE/FUNDRAISING CONSULTING

Full Name (Last, First, Middle Initial)
B. DIRECT SELLING ASSOCIATION

Mailing Address 1667 K STREET NW, SUITE 1100

City WASHINGTON State DC Zip Code 20006-1660

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 22 / 2012
Transaction ID : SA11.112

Amount of Each Receipt this Period
5000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
C. NEW CENTAUR, LLC

Mailing Address 10 W. MARKET STREET, SUITE 200

City INDIANAPOLIS State IN Zip Code 46204-2984

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
11 / 02 / 2012
Transaction ID : SA11.124

Amount of Each Receipt this Period
10000.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	54814.66
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 52
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)
A. NORTH CYPRESS MEDICAL CENTER OPERATING COMPANY LTD

Mailing Address 21216 NW FREEWAY, SUITE 610

City CYPRESS	State TX	Zip Code 77429-4699
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FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
100000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	01	/	2012

Transaction ID : SA11.122

Amount of Each Receipt this Period

100000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)
B.

Mailing Address _____

City _____	State _____	Zip Code _____
------------	-------------	----------------

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

--

Full Name (Last, First, Middle Initial)
C.

Mailing Address _____

City _____	State _____	Zip Code _____
------------	-------------	----------------

FEC ID number of contributing federal political committee. **C**

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
	/		/	

Amount of Each Receipt this Period

--

SUBTOTAL of Receipts This Page (optional).....▶	100000.00
TOTAL This Period (last page this line number only).....▶	324814.66

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 10 OF 52
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial) A. CHABOT FOR CONGRESS		Date of Receipt
Mailing Address 3030 HARRISON AVENUE		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
CINCINNATI	OH	45211-5758
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00301838"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	
		Transaction ID : SA11.125
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>
		CONTRIBUTION

Full Name (Last, First, Middle Initial) B. CITIZENS FOR TURNER		Date of Receipt
Mailing Address 120 W. SECOND S., SUITE 1510		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2012"/>
City	State	Zip Code
DAYTON	OH	45402-1603
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00373001"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="15000.00"/>	
		Transaction ID : SA11.118
		Amount of Each Receipt this Period <input type="text" value="15000.00"/>
		CONTRIBUTION

Full Name (Last, First, Middle Initial) C. JIM JORDAN FOR CONGRESS		Date of Receipt
Mailing Address 2160 KETTERING TOWER, SUITE 2160		<input type="text" value="11"/> / <input type="text" value="02"/> / <input type="text" value="2012"/>
City	State	Zip Code
DAYTON	OH	45423-1010
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00416594"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	
		Transaction ID : SA11.123
		Amount of Each Receipt this Period <input type="text" value="10000.00"/>
		CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="30000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value=""/>

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 52
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

A. STIVERS FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address 4679 WINTERSET DR.
City COLUMBUS State OH Zip Code 43220-8113
FEC ID number of contributing federal political committee. **C** C00441352
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 20000.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11.119
Amount of Each Receipt this Period 20000.00
CONTRIBUTION

B. TIBERI FOR CONGRESS
Full Name (Last, First, Middle Initial)
Mailing Address 2931 E DUBLIN GRANVILLE RD SUITE 190
City COLUMBUS State OH Zip Code 43231-2098
FEC ID number of contributing federal political committee. **C** C00347492
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 50000.00

Date of Receipt 10 / 31 / 2012
Transaction ID : SA11.120
Amount of Each Receipt this Period 50000.00
CONTRIBUTION

C. IMPACT COMMITTEE
Full Name (Last, First, Middle Initial)
Mailing Address 22780 INDIAN CREEK DR., SUITE 100
City STERLING State VA Zip Code 20166-6716
FEC ID number of contributing federal political committee. **C** C00525238
Name of Employer Occupation
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 11 / 09 / 2012
Transaction ID : SA11.126
Amount of Each Receipt this Period 4000.00
CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....▶	74000.00
TOTAL This Period (last page this line number only).....▶	104000.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. TRENT EDWARDS

Mailing Address 555 13TH STREET NW, SUITE 510 W

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB.1

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. CHARLES MEACHUM

Mailing Address 555 13TH STREET NW, SUITE 510 W

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB.2

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. CHARLES MEACHUM

Mailing Address 555 13TH STREET NW, SUITE 510 W

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
TRAVEL

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

002
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB.3

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. CHARLES MEACHUM

Mailing Address 555 13TH STREET NW, SUITE 510 W

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
RECEPTION

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.4

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. BRIAN WALSH

Mailing Address 555 13TH STREET NW, SUITE 510 W

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
TRAVEL

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.5

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. AMERICAN ACTION NETWORK

Mailing Address 555 13TH ST NW SUITE 510W

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
CONTRIBUTION IN KIND - PAYROLL/OFFICE SPACE/FUNDRAISING
CONSULTING

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.6

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 05 / 2012

Transaction ID : SB.10

Amount of Each Disbursement this Period

289.15

Full Name (Last, First, Middle Initial)

B. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : SB.7

Amount of Each Disbursement this Period

867.30

Full Name (Last, First, Middle Initial)

C. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 26 / 2012

Transaction ID : SB.8

Amount of Each Disbursement this Period

722.65

SUBTOTAL of Disbursements This Page (optional)..... ▶

1879.10

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. AMERICAN EXPRESS

Mailing Address PO BOX 53852

City PHOENIX State AZ Zip Code 85072

Purpose of Disbursement
MERCHANT FEE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2012

Transaction ID : SB.9

Amount of Each Disbursement this Period

7.95

Full Name (Last, First, Middle Initial)

B. AMERICAN VIEWPOINT, INC,

Mailing Address 300 NORTH LEE STREET, SUITE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING

005

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 22 / 2012

Transaction ID : SB.11

Amount of Each Disbursement this Period

14500.00

Full Name (Last, First, Middle Initial)

C. CAPITOL COMPUTER EXCHANGE

Mailing Address 4487 FORBES BOULEVARD

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
COMPUTER SERVICES

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 06 / 2012

Transaction ID : SB.12

Amount of Each Disbursement this Period

151.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

14658.95

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. CMDI

Mailing Address 7704 LEESBURG PIKE

City State Zip Code
FALLS CHURCH VA 22043

Purpose of Disbursement
DATABASE SUBSCRIPTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.13

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. DMM MEDIA, LLC

Mailing Address 3299 K STREET NW, SUITE 200

City State Zip Code
WASHINGTON DC 20007

Purpose of Disbursement
STRATEGY CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.14

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. EPIPHANY PRODUCTIONS, INC.

Mailing Address 104 HUME AVENUE

City State Zip Code
ALEXANDRIA VA 22301

Purpose of Disbursement
FUNDRAISING CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.15

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. LINDEN MEDIA LLC

Mailing Address 609 N. WEST STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement RESEARCH SERVICES

001

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : SB.16

Amount of Each Disbursement this Period

1600.00

Full Name (Last, First, Middle Initial)

B. LINDEN MEDIA LLC

Mailing Address 609 N. WEST STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement RESEARCH SERVICES

001

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2012

Transaction ID : SB.17

Amount of Each Disbursement this Period

1200.00

Full Name (Last, First, Middle Initial)

C. LVH CONSULTING

Mailing Address 2119 PAUL SPRING ROAD

City ALEXANDRIA State VA Zip Code 22307

Purpose of Disbursement FUNDRAISING CONSULTING

003

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 12 / 2012

Transaction ID : SB.18

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

4300.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. NMB RESEARCH LLC

Mailing Address 206 N. FAYETTE ST.

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB.19

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. PCI PAYMENT SOLUTIONS

Mailing Address 902 CHINQUAPIN

City MCLEAN State VA Zip Code 22102

Purpose of Disbursement
MERCHANT FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB.20

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. PIRYX, INC

Mailing Address 144 2ND ST., 1ST FLOOR

City SAN FRANCISCO State CA Zip Code 94105

Purpose of Disbursement
MERCHANT FEE

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

Date of Disbursement

/ /

Transaction ID : SB.21

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. PIRYX, INC.

Mailing Address 144 2ND ST., 1ST FLOOR

City State Zip Code
SAN FRANCISCO CA 94105

Purpose of Disbursement
MERCHANT FEE

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : SB.22

Amount of Each Disbursement this Period

11.94

Full Name (Last, First, Middle Initial)

B. PUBLIC OPINION STRATGEIES

Mailing Address 214 NORTH FAYETTE STREET

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Disbursement
POLLING

005

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : SB.23

Amount of Each Disbursement this Period

13000.00

Full Name (Last, First, Middle Initial)

C. REVOLUTION MEDIA GROUP LLC

Mailing Address 1020 PRINCESS STREET

City State Zip Code
ALEXANDRIA VA 22314

Purpose of Disbursement
STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 09 / 2012

Transaction ID : SB.24

Amount of Each Disbursement this Period

140813.54

SUBTOTAL of Disbursements This Page (optional)..... ▶

153825.48

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. REVOLUTION MEDIA GROUP LLC

Mailing Address 1020 PRINCESS STREET

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
TV/MEDIA PRODUCTION

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB.37**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. RICHARD SALES MEDIA

Mailing Address 9010 S. 10TH ST.

City PHOENIX State AZ Zip Code 85042

Purpose of Disbursement
WEB VIDEO

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB.38**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. SCOTT HOWELL & COMPANY

Mailing Address 3900 WILLOW ST., SUITE 200

City DALLAS State TX Zip Code 75226

Purpose of Disbursement
STRATEGY CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB.25**

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. SOMETHING ELSE STRATEGIES, LLC

Mailing Address 112 LANTERN RIDGE DRIVE

City EASLEY State SC Zip Code 29642

Purpose of Disbursement
STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 09 / 2012

Transaction ID : SB.26

Amount of Each Disbursement this Period

140813.54

Full Name (Last, First, Middle Initial)

B. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX STREET
SUITE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
EMAIL MARKETING

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : SB.27

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. TARGETED VICTORY

Mailing Address 1033 NORTH FAIRFAX STREET
SUITE 400

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
EMAIL MARKETING

004

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 09 / 2012

Transaction ID : SB.28

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

142813.54

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. THE KOZLOW GROUP

Mailing Address 41284 GUINNESS WAY

City LEESBURG State VA Zip Code 20175

Purpose of Disbursement
STRATEGY CONSULTING

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 09 / 2012

Transaction ID : SB.29

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. THE MCINTOSH COMPANY, INC.

Mailing Address 5310 HARVEST HILL ROAD, SUITE 209

City DALLAS State TX Zip Code 75230

Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2012

Transaction ID : SB.30

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. THE MCINTOSH COMPANY, INC.

Mailing Address 5310 HARVEST HILL ROAD, SUITE 209

City DALLAS State TX Zip Code 75230

Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 16 / 2012

Transaction ID : SB.31

Amount of Each Disbursement this Period

10000.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

14500.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. THE STARBOARD GROUP

Mailing Address 1420 W CANAL CT., SUITE 10

City LITTLETON State CO Zip Code 80120

Purpose of Disbursement
FUNDRAISING CONSULTING

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2012

Transaction ID : SB.32

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. THE TARRANCE GROUP

Mailing Address 201 N. UNION ST, SUITE 410

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
POLLING

005

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 22 / 2012

Transaction ID : SB.33

Amount of Each Disbursement this Period

14529.00

Full Name (Last, First, Middle Initial)

C. TRINITY FINANCIAL REPORTING & COMPLIANCE

Mailing Address 13051 FARTHINGALE DR.

City OAK HILL State VA Zip Code 20171

Purpose of Disbursement
ACCOUNTING AND COMPLIANCE

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 06 / 2012

Transaction ID : SB.34

Amount of Each Disbursement this Period

14775.00

SUBTOTAL of Disbursements This Page (optional)..... ▶

29804.00

TOTAL This Period (last page this line number only)..... ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Congressional Leadership Fund

Full Name (Last, First, Middle Initial)

A. VANDENBERG & ASSOCIATES INC.

Mailing Address 3927 ELM AVENUE

City LONG BEACH State CA Zip Code 90807

Purpose of Disbursement
FUNDRAISING CONSULTING

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.35

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. WILEY REIN LLP

Mailing Address 1776 K STREET NW

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
LEGAL SERVICES

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB.36

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ▶

TOTAL This Period (last page this line number only)..... ▶

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 815 SLATERS LANE		Amount 601854.00
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.130	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BETTY SUTTON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2743676.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 815 SLATERS LANE		Amount 201212.00
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.101	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEG0		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1093935.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	803066.00
(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.

CALEB CROSBY

Signature _____ [Electronically Filed] Date **12 / 19 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 815 SLATERS LANE		Amount 233785.20
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Transaction ID : SB.102
Name of Federal Candidate Supported or Opposed by Expenditure: MIKE MCINTYRE		Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 520030.80		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 815 SLATERS LANE		Amount 106581.20
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Transaction ID : SB.103
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 512380.10		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	340366.40
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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CALEB CROSBY

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12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 815 SLATERS LANE		Amount 348985.12
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.104	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHY HOCHUL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 890367.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee ANGLER, LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 1100 G STREET NW, SUITE 805		Amount 115000.00
City WASHINGTON	State DC	
Zip Code 20005	Transaction ID : SB.105	
Purpose of Expenditure WEB VIDEO - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BETTY SUTTON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2743676.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	463985.12
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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CALEB CROSBY

Signature _____ [Electronically Filed] Date MM / DD / YYYY **12 / 19 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee ANGLER, LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 1100 G STREET NW, SUITE 805		Amount 70000.00
City WASHINGTON	State DC	
Zip Code 20005	Transaction ID : SB.106	
Purpose of Expenditure WEB VIDEO - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1093935.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee ANGLER, LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 1100 G STREET NW, SUITE 805		Amount 65000.00
City WASHINGTON	State DC	
Zip Code 20005	Transaction ID : SB.107	
Purpose of Expenditure WEB VIDEO - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MIKE MCINTYRE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 520030.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	135000.00
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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CALEB CROSBY

Signature

[Electronically Filed]

Date

MM / DD / YYYY
12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee ANGLER, LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 1100 G STREET NW, SUITE 805		Amount 72000.00
City WASHINGTON	State DC	
Zip Code 20005	Transaction ID : SB.108	
Purpose of Expenditure WEB VIDEO - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 512380.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee REVOLUTION MEDIA GROUP LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 1020 PRINCESS STREET		Amount 14791.50
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.109	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 512380.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	86791.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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CALEB CROSBY

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL & COMPANY	Date M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 3900 WILLOW ST., SUITE 200	Amount 18257.52
City DALLAS State TX Zip Code 75226	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type []
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought [] 1093935.21	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : SB.110

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL & COMPANY	Date M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 3900 WILLOW ST., SUITE 200	Amount 17394.43
City DALLAS State TX Zip Code 75226	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type []
Name of Federal Candidate Supported or Opposed by Expenditure: KATHY HOCHUL	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought [] 890367.75	Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : SB.111

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	35651.95
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	[]
(c) TOTAL Independent Expenditures.....▶	[]

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CALEB CROSBY

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12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee SOMETHING ELSE STRATEGIES, LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 112 LANTERN RIDGE DRIVE		Amount 15000.00
City EASLEY	State SC	
Zip Code 29642	Transaction ID : SB.112	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BETTY SUTTON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2743676.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SOMETHING ELSE STRATEGIES, LLC		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 112 LANTERN RIDGE DRIVE		Amount 15000.00
City EASLEY	State SC	
Zip Code 29642	Transaction ID : SB.113	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MIKE MCINTYRE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 520030.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	30000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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CALEB CROSBY

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee SOMETHING ELSE STRATEGIES, LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 112 LANTERN RIDGE DRIVE		Amount 15000.00
City EASLEY State SC Zip Code 29642	Transaction ID : SB.114	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/22, 24 HR REPORT FILED 10/23	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: IA <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: LEONARD BOSWELL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 438336.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee TARGETED VICTORY		Date M M M / D D D / Y Y Y Y Y Y 10 / 22 / 2012
Mailing Address 1033 NORTH FAIRFAX STREET SUITE 400		Amount 80000.00
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SB.115	
Purpose of Expenditure WEB VIDEO - DISSEMINATED ON 10/19, 24 HR REPORT FILED 10/20	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHY HOCHUL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 890367.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	95000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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CALEB CROSBY

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee TARGETED VICTORY		Date MM / DD / YYYY 10 / 22 / 2012
Mailing Address 1033 NORTH FAIRFAX STREET SUITE 400		Amount 43000.00
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SB.116	
Purpose of Expenditure WEB VIDEO - DISSEMINATED ON 10/22, 24 HR REPORT FILED 10/22	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHY HOCHUL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 890367.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee ARENA COMMUNICATIONS		Date MM / DD / YYYY 10 / 23 / 2012
Mailing Address 1780 SEQUOIA VISTA CIRCLE		Amount 21762.00
City SALT LAKE CITY State UT Zip Code 84104	Transaction ID : SB.118	
Purpose of Expenditure DIRECT MAIL - DISSEMINATED ON 10/24, 24 HR REPORT FILED 10/24	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 512380.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	64762.00
(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.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee ARENA COMMUNICATIONS		Date MM / DD / YYYY 10 / 24 / 2012
Mailing Address 1780 SEQUOIA VISTA CIRCLE		Amount 21762.00
City SALT LAKE CITY	State UT	Zip Code 84104
Purpose of Expenditure DIRECT MAIL - DISSEMINATED ON 10/25, 24 HR REPORT FILED 10/26	Category/Type	Transaction ID : SB.121
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 512380.10		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee TARGETED CREATIVE COMMUNICATIONS, INC.		Date MM / DD / YYYY 10 / 24 / 2012
Mailing Address 106 S COLUMBUS ST.		Amount 10796.16
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure DIRECT MAIL - DISSEMINATED ON 10/25, 24 HR REPORT FILED 10/26	Category/Type	Transaction ID : SB.123
Name of Federal Candidate Supported or Opposed by Expenditure: VAL DEMINGS		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 32388.48		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	32558.16
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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CALEB CROSBY

Signature _____ [Electronically Filed] Date MM / DD / YYYY **12 / 19 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 25 / 2012
Mailing Address 815 SLATERS LANE		Amount 132333.20
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.124	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/26, 24 HR REPORT FILED 10/27	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 512380.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 25 / 2012
Mailing Address 815 SLATERS LANE		Amount 380816.48
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.125	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/26, 24 HR REPORT FILED 10/27	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHY HOCHUL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 890367.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	513149.68
(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.

CALEB CROSBY

Signature _____ [Electronically Filed] Date **12 / 19 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date 10 / 25 / 2012
Mailing Address 815 SLATERS LANE		Amount 206245.60
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SB.126	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/26, 24 HR REPORT FILED 10/27	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: NC <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MIKE MCINTYRE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 520030.80		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date 10 / 25 / 2012
Mailing Address 815 SLATERS LANE		Amount 630124.00
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SB.127	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/26, 24 HR REPORT FILED 10/27	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BETTY SUTTON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2743676.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	836369.60
(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.

CALEB CROSBY

Signature _____ [Electronically Filed] Date 12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 25 / 2012
Mailing Address 815 SLATERS LANE		Amount 285564.00
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.128	
Purpose of Expenditure TV/MEDIA PLACEMENT-DISSEMINATED ON 10/30, 24 HOUR REPORT FILED 10/31	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: NJ <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY ADLER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 627114.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 25 / 2012
Mailing Address 815 SLATERS LANE		Amount 458844.00
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.129	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/26, 24 HR REPORT FILED 10/27	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1093935.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	744408.00
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 25 / 2012
Mailing Address 815 SLATERS LANE		Amount 660089.40
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.131	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/26, 24 HR REPORT FILED 10/27	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PAT KREITLOW		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 675073.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee ARENA COMMUNICATIONS		Date MM / DD / YYYY 10 / 26 / 2012
Mailing Address 1780 SEQUOIA VISTA CIRCLE		Amount 21762.00
City SALT LAKE CITY	State UT	
Zip Code 84104	Transaction ID : SB.132	
Purpose of Expenditure DIRECT MAIL - DISSEMINATED ON 10/29, 24 HR REPORT FILED 10/30	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 512380.10		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	681851.40
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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CALEB CROSBY

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee TARGETED CREATIVE COMMUNICATIONS, INC.		Date M M M / D D D / Y Y Y Y Y Y 10 / 28 / 2012
Mailing Address 106 S COLUMBUS ST.		Amount 10796.16
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.133	
Purpose of Expenditure DIRECT MAIL - DISSEMINATED ON 10/29, 24 HR REPORT FILED 10/30	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: VAL DEMINGS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 32388.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee UPGRADE FILMS		Date M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 3299 K ST. NW, SUITE 200		Amount 14983.76
City WASHINGTON	State DC	
Zip Code 20007	Transaction ID : SB.134	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/26, 24 HR REPORT FILED 10/27	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PAT KREITLOW		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 675073.16		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	25779.92
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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CALEB CROSBY

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee UPGRADE FILMS		Date MM / DD / YYYY 10 / 29 / 2012
Mailing Address 3299 K ST. NW, SUITE 200		Amount 14979.41
City WASHINGTON	State DC	
Zip Code 20007	Transaction ID : SB.135	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: GARY MCDOWELL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 323151.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 10 / 29 / 2012
Mailing Address 815 SLATERS LANE		Amount 787057.00
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.146	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BRAD SCHNEIDER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 829421.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	802036.41
(b) SUBTOTAL of Unitemized Independent Expenditures..... ▶	
(c) TOTAL Independent Expenditures..... ▶	

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CALEB CROSBY

Signature _____ [Electronically Filed] Date **12 / 19 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 815 SLATERS LANE		Amount 527857.92
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type	Transaction ID : SB.147
Name of Federal Candidate Supported or Opposed by Expenditure: KYRSTEN SINEMA		Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 572748.88		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 815 SLATERS LANE		Amount 264058.00
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type	Transaction ID : SB.148
Name of Federal Candidate Supported or Opposed by Expenditure: BETTY SUTTON		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 2743676.60		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	791915.92
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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CALEB CROSBY

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px;"> C C00504530 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 29 / 2012 </div>
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 88230.80 </div>
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SB.149	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type <div style="border: 1px solid black; width: 40px; height: 20px;"></div>	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 24 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: LOIS CAPPS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 512380.10 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date <div style="border: 1px solid black; padding: 2px;"> M M / D D / Y Y Y Y Y Y 10 / 29 / 2012 </div>
Mailing Address 815 SLATERS LANE		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"> 176112.00 </div>
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SB.150	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type <div style="border: 1px solid black; width: 40px; height: 20px;"></div>	Office Sought: <input checked="" type="checkbox"/> House State: GA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOHN BARROW		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"> M M / D D / Y Y Y Y Y Y 191112.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> 264342.80 </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>

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.

CALEB CROSBY
 Signature _____

[Electronically Filed] Date

M M / D D / Y Y Y Y Y Y
12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee REVOLUTION MEDIA GROUP LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 1020 PRINCESS STREET		Amount 17364.92
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.144	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BRAD SCHNEIDER		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 829421.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee REVOLUTION MEDIA GROUP LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 1020 PRINCESS STREET		Amount 18702.96
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.145	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KYRSTEN SINEMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 572748.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	36067.88
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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CALEB CROSBY

Signature _____ [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL & COMPANY		Date M M / D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 3900 WILLOW ST., SUITE 200		Amount 19164.89
City DALLAS State TX Zip Code 75226	Transaction ID : SB.140	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/29, 24 HR REPORT FILED 10/30	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1093935.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL & COMPANY		Date M M / D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 3900 WILLOW ST., SUITE 200		Amount 13755.00
City DALLAS State TX Zip Code 75226	Transaction ID : SB.141	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/29, 24 HR REPORT FILED 10/30	Category/Type 	Office Sought: <input checked="" type="checkbox"/> House State: TX <input type="checkbox"/> Senate District: 23 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PETE GALLEGRO		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 1093935.21		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	32919.89
(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.

Signature CALEB CROSBY [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee SCOTT HOWELL & COMPANY		Date M M M / D D D / Y Y Y Y Y Y 10 / 29 / 2012
Mailing Address 3900 WILLOW ST., SUITE 200		Amount 20171.72
City DALLAS State TX Zip Code 75226	Transaction ID : SB.142	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/26, 24 HR REPORT FILED 10/27	Category/Type []	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 27 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KATHY HOCHUL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought [] 890367.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee REVOLUTION MEDIA GROUP LLC		Date M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2012
Mailing Address 1020 PRINCESS STREET		Amount 1188.00
City ALEXANDRIA State VA Zip Code 22314	Transaction ID : SB.152	
Purpose of Expenditure TV/MEDIA PRODUCTION - DISSEMINATED ON 10/30, 24 HR REPORT FILED 10/31	Category/Type []	Office Sought: <input checked="" type="checkbox"/> House State: AZ <input type="checkbox"/> Senate District: 09 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: KYRSTEN SINEMA		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought [] 572748.88		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	21359.72
(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.

CALEB CROSBY

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee TARGETED CREATIVE COMMUNICATIONS, INC.		Date MM / DD / YYYY 10 / 30 / 2012
Mailing Address 106 S COLUMBUS ST.		Amount 10796.16
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.153	
Purpose of Expenditure DIRECT MAIL - DISSEMINATED ON 10/31, 24 HR REPORT FILED 11/1	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 10 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: VAL DEMINGS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 32388.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 11 / 02 / 2012
Mailing Address 815 SLATERS LANE		Amount 88021.60
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.155	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 11/1, 24 HR REPORT FILED 11/2	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BETTY SUTTON		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 2743676.60		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	98817.76
(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.

CALEB CROSBY

Signature _____ [Electronically Filed] Date MM / DD / YYYY **12 / 19 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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

Full Name (Last, First, Middle Initial) of Payee AMERICAN MEDIA & ADVOCACY GROUP		Date MM / DD / YYYY 11 / 02 / 2012
Mailing Address 815 SLATERS LANE		Amount 88008.40
City ALEXANDRIA	State VA	
Zip Code 22314	Transaction ID : SB.156	
Purpose of Expenditure TV/MEDIA PLACEMENT - DISSEMINATED ON 11/2, 24 HR REPORT FILED 11/4	Category/Type	Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: GARY MCDOWELL		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 323151.41		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee		Date
Mailing Address		Amount
City	State	
Zip Code		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Purpose of Expenditure		Category/Type
Name of Federal Candidate Supported or Opposed by Expenditure:		Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	88008.40
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	7870825.64

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.

CALEB CROSBY

Signature

[Electronically Filed]

Date

MM / DD / YYYY
12 / 19 / 2012