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

Schedule E)		PAGE 1 OF 1 FOR SE OF FORM 24/48
AME OF COMMITTEE (In Full)  FEC IDENTIFICATION NUMBER ▼		
Congressional Leadership Fund		
		C C00504530
Check if 24-hour report		
Full Name of Payee		of Public Distribution/Dissemination
Meridian Pacific		00 / Y Y Y Y Y
Mailing Address 925 University Ave.		09 28 2020 unt
O'the Outle 77 Outle		
City State Zip C Sacramento CA 9582		20297.97 saction ID : SE.001
		of Disbursement or Obligation
Purpose of Expenditure Direct mail  Cate	egory/ Type 004	09 23 / 9 9 9
Name of Federal Candidate	Support Office Sough	nt: X House District: 02
Schupp, Jill, , ,	X Oppose Presid	
Calendar Year-To-Date	Disbursemer 2020	nt For: Primary 🗶 General
Per Election for Office Sought 202	2020	Other (specify)
Full Name of Payee	Date	of Public Distribution/Dissemination
		M M / D D / Y Y Y Y
Mailing Address		
	Amou	unt
City State Zip Code		
Purpose of Expenditure  Category/  Date of Disbursement or Obligation		
Cale	Type	, , , , , , , , , , , , , , , , , , , ,
Name of Federal Candidate	Support Office Sough	ht: House District:
	Oppose Presid	lent Senate State:
Calendar Year-To-Date	Disburseme	nt For: Primary General
Per Election for Office Sought		Other (specify)
•		
(a) SUBTOTAL of Itemized Independent Expenditures		20297.97
(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.		
Crosby, Caleb, , ,  [Electronically 1	Filed] Date 09	30 2020
Signature	, Date 03	2020