

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

 PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼ C C00504530
Check if ☒ 24-hour report ☐ 48-hour report ☒ New report ☐ Amends report filed on	

Full Name of Payee Big Dog Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 10 / 26 / 2020	
Mailing Address P.O. Box 217		Amount MM / DD / YYYY 32663.36	
City Clarence Center	State NY	Zip Code 14032	Transaction ID : SE.001 Date of Disbursement or Obligation MM / DD / YYYY 10 / 21 / 2020
Purpose of Expenditure Direct Mail	Category/ Type MM / DD / YYYY 004		
Name of Federal Candidate Brindisi, Anthony, , ,		Office Sought: ☒ House District: <u>22</u> ☐ President ☐ Senate State: <u>NY</u>	
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY 6270571.62		Disbursement For: ☐ Primary ☒ General 2020 ☐ Other (specify) ▶ _____	

Full Name of Payee		Date of Public Distribution/Dissemination MM / DD / YYYY MM / DD / YYYY	
Mailing Address		Amount MM / DD / YYYY MM / DD / YYYY	
City	State	Zip Code	Date of Disbursement or Obligation MM / DD / YYYY MM / DD / YYYY
Purpose of Expenditure	Category/ Type MM / DD / YYYY MM / DD / YYYY		
Name of Federal Candidate		Office Sought: ☐ House District: _____ ☐ President ☐ Senate State: _____	
Calendar Year-To-Date Per Election for Office Sought MM / DD / YYYY MM / DD / YYYY		Disbursement For: ☐ Primary ☐ General ☐ Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	MM / DD / YYYY 32663.36
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	MM / DD / YYYY MM / DD / YYYY
(c) TOTAL Independent Expenditures..... ▶	MM / DD / YYYY 32663.36

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 Filed]

Date

MM / DD / YYYY

10 / 27 / 2020

Signature