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

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report 48-hour report New report Amends report filed of	on M M / D D / Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
Arena	09 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1260 Stringham Ave.	Amount
#350	Amount
City State Zip Code	11254.00
Salt Lake City UT 84106	Transaction ID : SE.001 Date of Disbursement or Obligation
Purpose of Expenditure Direct mail Category/ Type 004	09 22 / 2020
Name of Federal Candidate Support Office	Sought: House District: 04
Owens, Burgess, , ,	President Senate State: UT
Calendar Year-To-Date Disbur	sement For: Primary X General
Per Election for Office Sought 1663672.91 2020	Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
Convergence Media	09 / 28 / 2020
Mailing Address 1010 N. Fairfax St.	Amount
2nd Floor	Amount
City State Zip Code	100000.00
Alexandria VA 22314	Transaction ID : SE.002 Date of Disbursement or Obligation
Purpose of Expenditure Media placement Category/ Type 004	09 29 / Y Y Y Y Y Y Y 2020
Name of Federal Candidate X Support Office	Sought:
Owens Burgess	President Senate State: UT
	rsement For: Primary X General
Per Election for Office Sought 1763672.91 2020	Other (specify) >
(a) SUBTOTAL of Itemized Independent Expenditures	111254.00
(,,)	7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	111254.00
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	· · · · · · · · · · · · · · · · · · ·
Crosby, Caleb, , , [Electronically Filed] Date 09	30 / 2020
Signature	