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
	<u> </u>
Check if 24-hour report 48-hour report New report Amends report file	d on M M / D D / Y Y Y Y Y
Full Name of Payee Nebo Media	Date of Public Distribution/Dissemination
INGDO IVIGUIA	09 12 2018
Mailing Address PO Box 9825	Amount
City State Zip Code	257104.69
Arlington VA 22219	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	09 / 06 / 2018
	ce Sought: House District: 02
Golden, Jared, , ,	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought Dist 2018	oursement For: Primary General Other (specify)
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
City State Zip Code	
Divines of Evenediture	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Office	ce Sought: House District:
Oppose	President Senate State:
Galerida Todi To Balo	bursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	257104.69
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	257104.69
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	09 14 2018
Signature	