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

Schedule E)	FOR SE OF FORM 24/48	
IAME 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	I on May / Dad / Yayayay	
Full Name of Payee	Date of Public Distribution/Dissemination	
Nebo Media	M M / D D / Y Y Y Y	
Mailing Address PO Box 9825	08 07 2018	
	Amount	
City State Zip Code	113517.56	
Arlington VA 22219	Transaction ID: 001 Date of Disbursement or Obligation	
Purpose of Expenditure Media Placement Category/ Type 004	08	
Name of Federal Candidate Support Office	e Sought: X House District: 22	
Brindisi, Anthony, , ,	President Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought Disbrace 113517.56 Disbrace 2018	ursement For: Primary General Other (specify) ▶	
Full Name of Payee	Date of Public Distribution/Dissemination	
Nebo Media	M = M / D = D / Y = Y = Y	
Mailing Address PO Box 9825	08 07 2018	
1 0 33% 3023	Amount	
City State Zip Code	872289.17	
Arlington VA 22219	Transaction ID : 002 Date of Disbursement or Obligation	
Purpose of Expenditure Media Placement Category/ 004	M = M / D = D / Y = Y = Y	
Type Type	08 03 2018	
Name of Federal Candidate Support Offic	e Sought: X House District: 22	
Brindisi, Anthony, , ,	President Senate State: NY	
Calendar Year-To-Date Per Election for Office Sought Disb 2018	ursement For: Primary X General	
Tel Election of Office Cought	Other (specify) -	
(a) SUBTOTAL of Itemized Independent Expenditures	985806.73	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	7 7	
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, , ,	- M / D - D / Y - Y - Y	
[Electronically Filed] Date Signature	08 09 2018	
-		

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAG FOF	GE 2 OF 2 R SE OF FORM 24/48	
IAME OF COMMITTEE (In Full)	FEC IDENT	IFICATION NUMBER ▼	
Congressional Leadership Fund	C C005	04530	
Check if 24-hour report 48-hour report New report Amends report filed on			
Full Name of Payee	Date of Public Diet	ribution/Dissemination	
FP1 Strategies	M = M / D	07 2018	
Mailing Address 1826 Jefferson PI, NW	Amount		
City State Zip Code		2800.00	
Washington DC 20036	Transaction ID: 0 Date of Disbursem	03	
Purpose of Expenditure Media Production Category Type	/ 004	08 / 2018	
Name of Federal Candidate	Support Office Sought: X Ho	ouse District: 22	
Brindisi, Anthony, , ,		enate State: NY	
Calendar Year-To-Date Per Election for Office Sought 988606.7		Primary	
Full Name of Payee	Date of Public Dis	tribution/Dissemination	
FP1 Strategies	M M / D	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 1826 Jefferson PI, NW	Amount		
City State Zip Code		20200.00	
Washington DC 20036	Transaction ID : 00 Date of Disbursem		
Purpose of Expenditure Media Production Category Type		08 / 2018	
Name of Federal Candidate	Support Office Sought: X Ho	ouse District: 22	
Brindisi, Anthony, , ,	Oppose President Se	enate State: NY	
Calendar Year-To-Date Per Election for Office Sought 1008806.7	Disbursement For: 2018 Other (specify)	Primary X General	
(a) SUBTOTAL of Itemized Independent Expenditures		23000.00	
		4	
(b) SUBTOTAL of Unitemized Independent Expenditures	······	7	
(c) TOTAL Independent Expenditures	······	1008806.73	
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 08 09	2018	
Signature			