## 10/31/2018 17 : 43

## Image# 201810319133570092 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

	hedule E)	IIUNES		PAGE 1 OF 1 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)				EC IDENTIFICATION NUMBER V	
Congressional Leadership Fund				C C00504530	
Ch	eck if X 24-hour report 48-hour report X New report	ort Amends repo	ort filed on		
	Full Name of Payee Nebo Media		Date of	Public Distribution/Dissemination	
				0 30 Y Y Y Y Y 2018	
	Mailing Address PO Box 9825		Amount		
	City State	Zip Code		7314.69	
	Arlington VA	22219		ction ID : 001 Disbursement or Obligation	
	Purpose of Expenditure Media Placement	Category/ Type 004	M	Image: Disbuscement of Obligation   Image: Disbuscement of Obligation	
	Name of Federal Candidate	Support	Office Sought:	¥ House District: _03	
	Davids, Sharice, , ,	× Oppose	Presider		
	Calendar Year-To-Date Per Election for Office Sought	2866253.79	Disbursement 2018 Oth	For: Primary	
	Full Name of Payee			Public Distribution/Dissemination	
			М	M / D D / Y Y Y Y	
	Mailing Address				
Amount					
	City State	Zip Code		- <u>m</u>	
			Date of	Date of Disbursement or Obligation	
	Purpose of Expenditure	Category/ Type	M	M / D D / Y Y Y Y	
	Name of Federal Candidate	Support	Office Sought:	House District:	
		Oppose	Presider	nt Senate State:	
	Calendar Year-To-Date		Disbursement	For: Primary General	
	Per Election for Office Sought	1 1 /8. 1	Oth	ner (specify) ►	
	(a) SUBTOTAL of Itemized Independent Expenditures			7314.69	
	(b) SUBTOTAL of Unitemized Independent Expenditures		·· •		
	(c) TOTAL Independent Expenditures		•	7314.69	
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, , ,		M M /		
	Signature	<i>ically Filed]</i> Date	e 10	31 2018	