

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

 PAGE 1 OF 2  
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>	<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00504530       </div>
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>Meridian Pacific</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10 / 28 / 2020         </div>	
Mailing Address 925 University Ave			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           7813.84         </div>	
City Sacramento	State CA	Zip Code 95825	<b>Transaction ID : SE.001</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10 / 20 / 2020         </div>	
Purpose of Expenditure Direct Mail		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">           004         </div>		
Name of Federal Candidate Cox, TJ, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2069885.12         </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Cavalry</b>			Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10 / 28 / 2020         </div>	
Mailing Address 1634 Eye Street NW #800			Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">           25199.36         </div>	
City Washington	State DC	Zip Code 20006	<b>Transaction ID : SE.002</b> Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px; display: inline-block;">           10 / 23 / 2020         </div>	
Purpose of Expenditure Media Placement		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">           004         </div>		
Name of Federal Candidate Cox, TJ, , ,			Office Sought: <input checked="" type="checkbox"/> House    District: 21 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">           2095084.48         </div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">           33013.20         </div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">             0.00           </div>
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">             33013.20           </div>

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

10 / 29 / 2020

Signature

**24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES**  
**(Schedule E)**PAGE 2 OF 2  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>Congressional Leadership Fund</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00504530
Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name of Payee <b>FlexPoint Media</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 28 / 2020</b>
Mailing Address P.O. Box 1051		Amount <b>326063.00</b>
City New Albany	State OH	Zip Code 43054
Purpose of Expenditure Media Placement	Category/ Type <b>004</b>	Transaction ID : <b>SE.003</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 23 / 2020</b>
Name of Federal Candidate Cox, TJ, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>21</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought <b>2421147.48</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee <b>RumbleUp</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>10 / 28 / 2020</b>
Mailing Address 2021 L Street NW Suite 101-220		Amount <b>1341.20</b>
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Text Messages	Category/ Type <b>004</b>	Transaction ID : <b>SE.004</b> Date of Disbursement or Obligation MM / DD / YYYY <b>10 / 26 / 2020</b>
Name of Federal Candidate Cox, TJ, , ,	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House    District: <u>21</u> <input type="checkbox"/> President <input type="checkbox"/> Senate    State: <u>CA</u>
Calendar Year-To-Date Per Election for Office Sought <b>2422488.68</b>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2020 <input type="checkbox"/> Other (specify) ▶

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶	<b>327404.20</b>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶	
(c) <b>TOTAL</b> Independent Expenditures..... ▶	<b>360417.40</b>

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 / 29 / 2020**

Signature