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

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
IAME OF COMMITTEE (In Full)	
Congressional Leadership Fund	FEC IDENTIFICATION NUMBER ▼
·	C C00504530
	M = M / D = D / Y = Y = Y
Check if 24-hour report 48-hour report New report Amends report file	
Full Name of Payee	Date of Public Distribution/Dissemination
Nebo Media	09 26 Y Y Y Y Y
Mailing Address PO Box 9825	Amount
City State Zip Code	317682.50
Arlington VA 22219	Transaction ID: 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	09 / 21 / 2018
Name of Federal Candidate Support Off	fice Sought: House District: 01
Pureval, Aftab, , ,	President Senate State: OH
	Tresident Senate State.
Calendar Year-To-Date Per Election for Office Sought Dis 20'	Sbursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y
Mailing Address	
	Amount
City State Zip Code	
Oity State Zip Gode	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate Support Of	fice Sought: House District:
Oppose	President Senate State:
	sbursement For: Primary General
Calendar Year-To-Date Per Election for Office Sought	
	Other (specify) -
4	
(a) SUBTOTAL of Itemized Independent Expenditures	317682.50
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7
(c) TOTAL Independent Expenditures	317682.50
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.	
Cookin Calab	
Crosby, Caleb, , , [Electronically Filed] Date	09 28 2018
Signature	