

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

NAME OF COMMITTEE (In Full) Congressional Leadership Fund
FEC IDENTIFICATION NUMBER C C00504530
Check if [x] 24-hour report [] 48-hour report [x] New report [] Amends report filed on

Full Name of Payee Arena
Mailing Address 1260 Stringham Ave #350
City Salt Lake City State UT Zip Code 84106
Purpose of Expenditure Media Placement Category/Type 004

Date of Public Distribution/Dissemination 10 / 28 / 2020
Amount 39597.42
Transaction ID : SE.001
Date of Disbursement or Obligation 10 / 23 / 2020

Name of Federal Candidate Schroder, Kate, , ,
[] Support [x] Oppose
Office Sought: [] President [x] House District: 01 State: OH

Disbursement For: [] Primary [x] General 2020
[] Other (specify)

Full Name of Payee FlexPoint Media
Mailing Address PO Box 1051
City New Albany State OH Zip Code 43054
Purpose of Expenditure Media Placement Category/Type 004

Date of Public Distribution/Dissemination 10 / 28 / 2020
Amount 348346.00
Transaction ID : SE.002
Date of Disbursement or Obligation 10 / 23 / 2020

Name of Federal Candidate Schroder, Kate, , ,
[] Support [x] Oppose
Office Sought: [] President [x] House District: 01 State: OH

Disbursement For: [] Primary [x] General 2020
[] Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 387943.42, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 387943.42

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