24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	THE EXILENCE	TI OTILO		PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC II	DENTIFICATION NUMBER ▼
Congressional Leadership Fund				C00504530
Check if 24-hour report 48-hour report	× New rep	port Amends repo	ort filed on	/ D D / Y Y Y Y Y
Full Name of Payee			Date of Public	c Distribution/Dissemination
Arena			10	22 2020
Mailing Address 1260 Stringham Ave			Amount	
#350				
City Salt Lake City	State UT	Zip Code 84106	Transaction	18080.00 ID: SE.001 ursement or Obligation
Purpose of Expenditure Direct Mail		Category/ Type 004	M M M	15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	✗ House District: 01
Finkenauer, Abby, , ,		X Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	, , ,	2975636.42	Disbursement For: 2020 Other (sp	Primary ✗ General pecify) ▶
Full Name of Payee			Date of Publi	ic Distribution/Dissemination
Arena			10	22 2020
Mailing Address 1260 Stringham Ave			Amount	
#350 City	State	Zip Code		10162.00
Salt Lake City	UT	84106	Transaction II Date of Disbu	
Purpose of Expenditure Direct Mail		Category/ Type 004	10	15 2020
Name of Federal Candidate		Support	Office Sought:	x House District:01
Finkenauer, Abby, , ,		x Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	77	2985798.42	Disbursement For: 2020 Other (sp	Primary ★ General pecify) ►
(a) SUBTOTAL of Itemized Independent Expenditu	ıres		>	28242.00
(b) SUBTOTAL of Unitemized Independent Expendent	ditures			
(c) TOTAL Independent Expenditures				
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, , , Signature	[Electro	nically Filed] Date	10 / 23	2020

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48			
NAME 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 on	M = M / D = D / Y = Y = Y			
Full Name of Payee D	Date of Public Distribution/Dissemination			
Arena	10 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
	mount			
#350				
City State Zip Code Salt Lake City UT 84106 T	10162.00			
D	ransaction ID : SE.003 Date of Disbursement or Obligation			
Purpose of Expenditure Direct Mail Category/ Type 004	10 15 / Y Y Y Y Y Y			
Name of Federal Candidate Support Office So	ought: X House District: 01			
Hinson Ashley	resident Senate State: IA			
Calendar Year-To-Date Per Election for Office Sought Disburse 2995960.42	ement For: Primary General Other (specify) ▶			
Full Name of Payee	Date of Public Distribution/Dissemination			
	M M / D D / Y Y Y Y			
Mailing Address	Amount			
City State Zip Code				
State Zip Code				
Purpose of Expenditure	Date of Disbursement or Obligation			
Category/ Type	M M / D D / Y Y Y Y			
Name of Federal Candidate Support Office S	ought: House District:			
Oppose Pr	resident Senate State:			
Calendar Year-To-Date Per Election for Office Sought	ement For: Primary General			
- St. Electrical College Colle	Other (specify) -			
(a) SUBTOTAL of Itemized Independent Expenditures	10162.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
()				
(c) TOTAL Independent Expenditures	38404.00			
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	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Signature				