

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

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

Full Name of Payee Meridian Pacific
Mailing Address 925 University Ave
City Sacramento State CA Zip Code 95825
Purpose of Expenditure Direct Mail Category/Type 004

Date of Public Distribution/Dissemination 10/07/2020
Amount 20344.05
Transaction ID : SE.001
Date of Disbursement or Obligation 09/18/2020

Name of Federal Candidate Cox, Tj, , , Support Oppose
Office Sought: House District: 21 State: CA
Disbursement For: Primary General 2020

Calendar Year-To-Date Per Election for Office Sought 982995.35
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee Cavalry
Mailing Address 1634 Eye Street NW #800
City Washington State DC Zip Code 20006
Purpose of Expenditure Media Placement Category/Type 004

Date of Public Distribution/Dissemination 10/07/2020
Amount 45939.10
Transaction ID : SE.002
Date of Disbursement or Obligation 10/02/2020

Name of Federal Candidate Cox, Tj, , , Support Oppose
Office Sought: House District: 21 State: CA
Disbursement For: Primary General 2020

Calendar Year-To-Date Per Election for Office Sought 1028934.45
Disbursement For: Primary General 2020 Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 66283.15, (b) SUBTOTAL of Unitemized Independent Expenditures, (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, , , [Electronically Filed] Date 10/09/2020
Signature

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Full Name of Payee FlexPoint Media
Mailing Address P.O. Box 1051
City New Albany State OH Zip Code 43054
Purpose of Expenditure Media Placement Category/Type 004
Name of Federal Candidate Cox, Tj, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1270560.18

Date of Public Distribution/Dissemination 10 / 07 / 2020
Amount 241625.73
Transaction ID : SE.003
Date of Disbursement or Obligation 10 / 02 / 2020
Office Sought: House District: 21 State: CA
Disbursement For: General 2020

Full Name of Payee Meridian Pacific
Mailing Address 925 University Ave
City Sacramento State CA Zip Code 95825
Purpose of Expenditure Direct Mail Category/Type 004
Name of Federal Candidate Cox, Tj, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1278374.02

Date of Public Distribution/Dissemination 10 / 07 / 2020
Amount 7813.84
Transaction ID : SE.004
Date of Disbursement or Obligation 10 / 05 / 2020
Office Sought: House District: 21 State: CA
Disbursement For: General 2020

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 249439.57, (b) SUBTOTAL of Unitemized Independent Expenditures, (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, , , [Electronically Filed] Date 10 / 09 / 2020
Signature

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Full Name of Payee RedPrint Strategy
Mailing Address 1050 Johnnie Dodds Blvd Unit 2414
City Mount Pleasant State SC Zip Code 29465
Purpose of Expenditure Media Production Category/Type 004
Name of Federal Candidate Cox, Tj, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1292374.02

Date of Public Distribution/Dissemination 10 / 07 / 2020
Amount 14000.00
Transaction ID : SE.005
Date of Disbursement or Obligation 10 / 08 / 2020
Office Sought: House District: 21 State: CA
Disbursement For: General 2020

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type
Name of Federal Candidate Support Oppose
Calendar Year-To-Date Per Election for Office Sought

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation
Office Sought: House District: State:
Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 14000.00, (b) SUBTOTAL of Unitemized Independent Expenditures, (c) TOTAL Independent Expenditures 329722.72

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.
Signature Crosby, Caleb, , , [Electronically Filed] Date 10 / 09 / 2020