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)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		
		C C00504530
check if X 24-hour report 48-hour report	New report Amends report filed	on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
Advantage Direct Communication		09 05 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 2300 Clarendon Blvd		
Suite 303		Amount
City State	Zip Code	3384.48
Arlington	22201	Transaction ID : 001 Date of Disbursement or Obligation
Purpose of Expenditure Phone calls	Category/ Type 004	09 06 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	✗ Support Office	e Sought: X House District: 09
Bishop, Dan, , ,	Oppose	President Senate State: NC
Calendar Year-To-Date	Disbu	ursement For: Primary General
Per Election for Office Sought	2337275.22 2019	▼ Other (specify) ► Special General
Full Name of Payee		Date of Public Distribution/Dissemination
		M = M / D = D / Y = Y = Y
Mailing Address		
		Amount
City State	Zip Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/	M M / D D / Y Y Y Y
	Type	
Name of Federal Candidate	Support Office	e Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date	Disbu	ursement For: Primary General
Per Election for Office Sought		Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		3384.48
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures	•	3384.48
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, , ,	M	M / D D / Y - Y - Y - Y
Signature	[Electronically Filed] Date	09 06 2019
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