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

Schedule E)	PAGE 1 OF 1 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	
Congressional Leadership Fund	C C00504530
	O state and
Check if X 24-hour report 48-hour report New report Amends report filed on M M / D D / Y Y Y Y Y Y	
Full Name of Payee Big Dog Strategies	Date of Public Distribution/Dissemination
	10 / 22 / Y Y Y Y Y
Mailing Address P.O. Box 217	Amount
City State Zip Code	43410.97
Clarence Center NY 14032	Transaction ID : SE.001 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail Category/ Type	004 10 / 19 / 2020
Name of Federal Candidate Su	upport Office Sought: x House District: 03
Kind, Ron, , ,	pose President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 1875287.92	Disbursement For: Primary 2020 Other (specify) ▶
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/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Su	upport Office Sought: House District:
O _f	ppose President Senate State:
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought	Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	43410.97
(b) SUBTOTAL of Unitemized Independent Expenditures	············· •
(c) TOTAL Independent Expenditures	43410.97
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 23 2020
Signature	