

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)PAGE 1 OF 2
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Congressional Leadership Fund		FEC IDENTIFICATION NUMBER ▼ C C00504530
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee FlexPoint Media Inc		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022
Mailing Address PO Box 1051		Amount 182717.50
City New Albany	State OH	Zip Code 43054
Purpose of Expenditure Media Placement	Category/ Type 004	Transaction ID : 001 Date of Disbursement or Obligation MM / DD / YYYY 09 / 09 / 2022
Name of Federal Candidate Vargas, Anthony, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought 412684.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Arena LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022
Mailing Address 1260 Stringham Ave #350		Amount 41000.00
City Salt Lake City	State UT	Zip Code 84106
Purpose of Expenditure Digital Placement	Category/ Type 004	Transaction ID : 002 Date of Disbursement or Obligation MM / DD / YYYY 09 / 11 / 2022
Name of Federal Candidate Vargas, Anthony, , ,		Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought 453684.75		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	223717.50
(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, , ,

Signature

[Electronically Filed]

Date

MM / DD / YYYY
09 / 16 / 2022

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Full Name of Payee Something Else Strategies, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022	
Mailing Address 212 Golden Willow Court		Amount 13000.00	
City Easley	State SC	Zip Code 29642	Transaction ID : 003
Purpose of Expenditure Media Production		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 12 / 2022
Name of Federal Candidate Vargas, Anthony, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee RumbleUp, LLC		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2022	
Mailing Address 2001 K St NW		Amount 4500.00	
City Washington	State DC	Zip Code 20006	Transaction ID : 004
Purpose of Expenditure Text Messages		Category/ Type 004	Date of Disbursement or Obligation MM / DD / YYYY 09 / 14 / 2022
Name of Federal Candidate Vargas, Anthony, , ,		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 02 <input type="checkbox"/> President <input type="checkbox"/> Senate State: NE
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2022 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	17500.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	241217.50

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

MM / DD / YYYY
09 / 16 / 2022

Signature