

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 FlexPoint Media
Mailing Address PO Box 1051
City New Albany State OH Zip Code 43054
Purpose of Expenditure Media placement Category/Type 004
Name of Federal Candidate Brindisi, Anthony, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1522900.61

Date of Public Distribution/Dissemination 09 / 23 / 2020
Amount 547255.90
Transaction ID : SE.001
Date of Disbursement or Obligation 09 / 18 / 2020
Office Sought: House District: 22 State: NY
Disbursement For: General 2020

Full Name of Payee FlexPoint Media
Mailing Address PO Box 1051
City New Albany State OH Zip Code 43054
Purpose of Expenditure Media placement Category/Type 004
Name of Federal Candidate Brindisi, Anthony, , , Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1569495.45

Date of Public Distribution/Dissemination 09 / 23 / 2020
Amount 46594.84
Transaction ID : SE.002
Date of Disbursement or Obligation 09 / 18 / 2020
Office Sought: House District: 22 State: NY
Disbursement For: General 2020

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 593850.74

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 09 / 25 / 2020
Signature

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 DMM Media
Mailing Address 1911 N. Fort Myer Drive Suite 400
City Arlington State VA Zip Code 22209
Purpose of Expenditure Media production Category/Type 004

Date of Public Distribution/Dissemination 09/23/2020
Amount 15924.90
Transaction ID : SE.003
Date of Disbursement or Obligation 09/22/2020

Name of Federal Candidate Brindisi, Anthony, ,
Support Oppose
Calendar Year-To-Date Per Election for Office Sought 1585420.35

Office Sought: House District: 22
President Senate State: NY
Disbursement For: Primary General 2020 Other (specify)

Full Name of Payee
Mailing Address
City State Zip Code
Purpose of Expenditure Category/Type

Date of Public Distribution/Dissemination
Amount
Date of Disbursement or Obligation

Name of Federal Candidate
Support Oppose

Office Sought: House District:
President Senate State:

Calendar Year-To-Date Per Election for Office Sought

Disbursement For: Primary General Other (specify)

Table with 2 columns: Description and Amount. (a) SUBTOTAL of Itemized Independent Expenditures 15924.90; (b) SUBTOTAL of Unitemized Independent Expenditures; (c) TOTAL Independent Expenditures 609775.64

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 09/25/2020
Signature