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

Schedule E)		PAGE 1 OF 2 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼	
Congressional Leadership Fund		C C00504530	
		0 00004000	
Check if 24-hour report 48-hour report New report Amends report filed on			
Full Name of Payee	Di	ate of Public Distribution/Dissemination	
Arena LLC		09 14 2022	
Mailing Address 1260 Stringham Ave		mount	
#350	г		
City State Zip Co		97000.00 ransaction ID : 001	
Can Land Only		ate of Disbursement or Obligation	
Purpose of Expenditure Digital Placement Category	gory/ Type 004	M M / D D / Y Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1	
Name of Federal Candidate	Support Office Sc	ought: 🗶 House District:03	
Lee, Susie, , ,	X Oppose Pre	esident Senate State: NV	
Calendar Year-To-Date Per Election for Office Sought 9700	Disburse 2022	ement For: Primary General Other (specify)	
Full Name of Payee	D	Pate of Public Distribution/Dissemination	
FlexPoint Media Inc		09 14 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address PO Box 1051			
	A	mount	
City State Zip Co	ode	869067.50	
New Albany OH 43054	•	ansaction ID: 002 Date of Disbursement or Obligation	
Purpose of Expenditure Media Placement Cate	gory/ Type 004	09 13 2022	
Name of Federal Candidate	Support Office So	ought: 🗶 House District: 03	
Lee, Susie, , ,	X Oppose Pro	resident Senate State: NV	
Calendar Year-To-Date		ement For: Primary	
Per Election for Office Sought 9660	67.50	Other (specify) ▶	
(a) SUBTOTAL of Itemized Independent Expenditures	······	966067.50	
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
		7 7	
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 Fig. 2]	iled] Date 09	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature			

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	PAGE 2 OF 2 FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)	C IDENTIFICATION NUMBER ▼		
Congressional Leadership Fund	C00504530		
Check if 24-hour report			
Patchwork Creative			
Mailing Address 1320 N Courthouse Rd Amount	14 2022		
Suite 130			
City State Zip Code	13000.00		
· ······g····	on ID: 003 isbursement or Obligation		
Purpose of Expenditure Media Production Category/ Type 004			
Name of Federal Candidate Support Office Sought:	✗ House District: 03		
Lee, Susie, , , Cappert Chief estagnic	Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo 2022 Other	or: Primary x General (specify) ▶		
	Public Distribution/Dissemination		
RumbleUp, LLC	14 / 2022		
Mailing Address 2001 K St NW Amount			
City State Zip Code	8000.00		
	on ID: 004 Disbursement or Obligation		
Purpose of Expenditure Text Messages Category/ Type 004	14 / 2022		
Name of Federal Candidate Support Office Sought:	✗ House District:03		
Lee, Susie, , , President	Senate State: NV		
Calendar Year-To-Date Per Election for Office Sought Disbursement For 2022 Other	or: Primary X General r (specify) ►		
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures	987067.50		
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.			
(77)	16 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		