Schedule E)		PAGE 1 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	ort Amends report	filed on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC		09 25 2024
Mailing Address PO BOX 1051		Amount
City State	Zip Code	282935.56
NEW ALBANY OH	43054	Transaction ID : SE24.668 Date of Disbursement or Obligation
Purpose of Expenditure	Category/	M M / D D / Y Y Y Y
MEDIA PLACEMENT	Type 004	09 20 2024
Name of Federal Candidate	X Support C	Office Sought:
BEGICH, NICHOLAS, , , III	Oppose	President Senate State: AK
Calendar Year-To-Date		Disbursement For: Primary X General 024
Per Election for Office Sought	1741999.17	Other (specify)
Full Name of Payee KAP PRINT LLC		Date of Public Distribution/Dissemination
KAP PRINT LLC		09 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 QUINN DRIVE		Amount
City State	Zip Code	15040.55 Transaction ID : SE24.657
DRIPPING SPRINGS TX	78620	Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL	Category/ Type 004	09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		'
Name of Federal Candidate BEGICH, NICHOLAS, , ,		Office Sought: House District: 01
BEGION, NICHOLAG, , ,	Oppose	President Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary X General
Per Election for Office Sought	1 1 / 20	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		297976.11
(b) SUBTOTAL of Unitemized Independent Expenditures		
(8) 66216112 61 61111111111111111111111111		7 7 7
(c) TOTAL Independent Expenditures		
		4 4
Under penalty of perjury I certify that the independent expenditures	reported herein were no	of made in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or authorized	•	
party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	.	M = M / D = D / Y = Y = Y = Y
Signature	Date	09 27 2024

So	chedule E)		TOTILO			PAGE 2 OF 53 FOR SE OF FORM 24/48
NΑ	ME OF COMMITTEE (In Full)				FEC II	DENTIFICATION NUMBER ▼
C	Congressional Leadership Fund				С	C00504530
Ch	neck if 24-hour report X 48-hour report Ne	ew rep	ort Amends repo	ort filed on	M = M	/ D D / Y D Y D Y
	Full Name of Payee FLEXPOINT MEDIA INC			Dat	e of Publi	c Distribution/Dissemination
					M 09	25 / 2024
	Mailing Address PO BOX 1051			Am	ount	
	City State		Zip Code	<u> —</u> г		2868.96
	NEW ALBANY OH		43054			ID: SE24.533 ursement or Obligation
	Purpose of Expenditure		Category/ 004		M M	/ D D / Y Y Y Y Y
	MEDIA PLACEMENT		Type 004		09	20 2024
	Name of Federal Candidate		Support	Office Sou	ght:	X House District: 01
	PELTOLA, MARY, , ,		Oppose	Pres	ident	Senate State: AK
	Calendar Year-To-Date Per Election for Office Sought		1741999.17	Disbursem 2024	ent For: Other (sp	Primary
	Full Name of Payee			Dat	e of Publ	ic Distribution/Dissemination
	FLEXPOINT MEDIA INC				M M	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Mailing Address PO BOX 1051				09	25 2024
	5 1 0 BOX 1001			Am	ount	
	City State		Zip Code			152346.07
	NEW ALBANY OH		43054			D: SE24.534 ursement or Obligation
	Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004		09 ^M	20 / 2024
	Name of Federal Candidate		Support	Office Sou	abt:	X House District: 01
	PELTOLA, MARY, , ,		Support Oppose		ident	House District: 01 Senate State: AK
	Calendar Year-To-Date		4744000 47	Disbursem 2024	L	Primary X General
	Per Election for Office Sought	- 7	1741999.17	2024	Other (s	pecify) ►
	(a) CURTOTAL of the principal leaders and out Foreign distance					155015.00
	(a) SUBTOTAL of Itemized Independent Expenditures			•		155215.03
	(b) SUBTOTAL of Unitemized Independent Expenditures			·· •		
	(c) TOTAL Independent Expenditures					
	· · ·					45
	Under penalty of perjury I certify that the independent expension of at the request or suggestion of, any candidate or authoraty committee) any political party committee or its agent.					
	Crosby, Caleb, , ,		_	M M M	/ 0 0	
	Signature		_ Date	9 09	27	2024

Schedule E)	-/(I - (1-)	10.120		PAGE 3 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			F	EC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund				C C00504530
Check if 24-hour report X 48-hour report	X New repo	ort Amends repo	ort filed on	M / D = D / Y = Y = Y = Y
Full Name of Payee			Date of	Public Distribution/Dissemination
FLEXPOINT MEDIA INC				9 25 2024
Mailing Address PO BOX 1051			Amount	
City Sta	tate	Zip Code		90000.00
NEW ALBANY C	ОН	43054		ction ID : SE24.555 Disbursement or Obligation
Purpose of Expenditure		Category/	M	M / D D / Y Y Y
DIGITAL PLACEMENT		Type 004		9 23 2024
Name of Federal Candidate		Support	Office Sought:	House District: 01
PELTOLA, MARY, , ,		X Oppose	Presiden	t Senate State: AK
Calendar Year-To-Date Per Election for Office Sought		1741999.17	Disbursement 2024 Oth	For: Primary ☐ General er (specify) ►
Full Name of Payee			Date of	Public Distribution/Dissemination
KAP PRINT LLC				M / D D / Y Y Y Y
Mailing Address 220 QUINN DRIVE				9 25 2024
ZZU QUINN DRIVE			Amount	t
City	State	Zip Code		15143.17
DRIPPING SPRINGS	TX	78620		tion ID : SE24.625 Disbursement or Obligation
Purpose of Expenditure		Category/ 004	M	M / D D / Y Y Y Y
DIRECT MAIL		Type 004		9 24 2024
Name of Federal Candidate		X Support	Office Sought:	House District: 01
SCHWEIKERT, DAVID, , ,		Oppose	Presiden	senate State: AZ
Calendar Year-To-Date Per Election for Office Sought		1375330.63	Disbursement 2024	
	7		Utn	ner (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures				105143.17
(b) SUBTOTAL of Unitemized Independent Expenditures	s			
(4)		••••		4 4
(c) TOTAL Independent Expenditures			•	77
Under penalty of perjury I certify that the independent e with, or at the request or suggestion of, any candidate o party committee) any political party committee or its age	or authorized			
Crosby, Caleb, , ,		Date	00	27 / Y Y Y Y Y Y Y Y 2024
Signature		_ Date		

Schedule E)	1 - /(1 - (1 -)	1101120		PAGE 4 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Congressional Leadership Fund			C	C00504530
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	ort filed on	/ D D / Y T Y T Y
Check If 24-110ur report 40-110ur report	New teh	Off Allienus Tepo	ort filed off	
Full Name of Payee FLEXPOINT MEDIA INC			M = M	olic Distribution/Dissemination
Mailing Address PO BOX 1051			Amount	25 2024
				700004.00
City NEW ALBANY	State OH	Zip Code 43054		730024.99 n ID : SE24.531
Purpose of Expenditure		Catagony	Date of Dist	bursement or Obligation
MEDIA PLACEMENT		Category/ Type 004	09	20 / 2024
Name of Federal Candidate		Support	Office Sought:	X House District: 01
SHAH, AMISH, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7 7	1375330.63	Disbursement For: 2024 Other (s	Primary ⊠ General specify) ▶
Full Name of Payee			Date of Pub	olic Distribution/Dissemination
FLEXPOINT MEDIA INC			M = M	/ DID / YIYIY Y
Mailing Address PO BOX 1051			09	25 2024
Maining Additions PO BOX 1051			Amount	
City	State	Zip Code		3286.76
NEW ALBANY	ОН	43054		ID: SE24.532 bursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004	M 09	20 / 2024
Name of Federal Candidate		Support	Office Sought:	House District: 01
SHAH, AMISH, , ,		Support Oppose	President	House District: 01 Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	1375330.63	Disbursement For: 2024	Primary X General specify) ▶
				Specify)
(a) SUBTOTAL of Itemized Independent Expenditure	∋s		•	733311.75
(b) SUBTOTAL of Unitemized Independent Expendit	tures		•	
(c) TOTAL Independent Expenditures)	p 1 2 2 1
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized			
Crosby, Caleb, , ,		Date	9 09 / 27	2024
Signature		_		

Schedule E)	1 - /(1 - /(2)			PAGE 5 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	C IDENTIFICATION NUMBER ▼
Congressional Leadership Fund			C	
Check if 24-hour report X 48-hour report	New repo	oort Amends repo	ort filed on	/ D D / Y Y Y Y Y
Full Name of Payee CAVALRY LLC			Date of Pu	ublic Distribution/Dissemination
			09	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1634 EYE STREET NW			Amount	
#800				
City	State	Zip Code		160000.00
WASHINGTON	DC	20006		on ID : SE24.582 isbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT		Category/ 004	M M M	23 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
		Type 004		التلاليا التا ال
Name of Federal Candidate		Support	Office Sought:	House District:01
SHAH, AMISH, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date		1275220 62	Disbursement Fo	r: Primary X General
Per Election for Office Sought	, ,	1375330.63		(specify) ▶
Full Name of Payee			Date of P	ublic Distribution/Dissemination
KAP PRINT LLC			M _ M	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 QUINN DRIVE				التنا لتنا ل
			Amount	
City	State	Zip Code		15532.78
DRIPPING SPRINGS	TX	78620		n ID : SE24.619 isbursement or Obligation
Purpose of Expenditure		Category/ 004	M = M	/ D D / Y Y Y Y
DIRECT MAIL		Type 004	09	24 2024
Name of Federal Candidate		X Support	Office Sought:	House District: 06
CISCOMANI, JUAN, , ,		Oppose	President	Senate State: AZ
Calendar Year-To-Date		:::::::::::::::::::::::::::::::::::::::	Disbursement Fo	r: Primary X General
Per Election for Office Sought	7 7	1855093.38		(specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	∋s		. •	175532.78
(b) SUBTOTAL of Unitemized Independent Expendit	.ures		• •	7 7 7
(c) TOTAL Independent Expenditures				
(b) TOTAL Independent Experience communication			•	4 4
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate.				
party committee) any political party committee or its				
2 . 2			- M - M / D	D / Y Y Y Y Y
Crosby, Caleb, , ,		Date	00	27 2024
Signature				

ooneddic Ly		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	Dat	te of Public Distribution/Dissemination
FLEXPOINT MEDIA INC		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051	Am	ount
City State Zip Cod	le	565372.58
NEW ALBANY OH 43054	Tra	Insaction ID : SE24.530 te of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category Ty		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office Sou	ught: X House District: 06
ENGEL, KIRSTEN, , ,	=	sident Senate State: AZ
Calendar Year-To-Date Per Election for Office Sought 1855093	Disbursem 2024	
		Other (specify)
Full Name of Payee CAVALRY LLC	Da	te of Public Distribution/Dissemination 09 25 2024
Mailing Address 1634 EYE STREET NW	Am	09 25 2024 nount
#800		
City State Zip Cod WASHINGTON DC 20006	Trai	125000.00 nsaction ID : SE24.584
Purpose of Expenditure		te of Disbursement or Obligation
Catego	ory/ /pe 004	09 23 / 2024
Name of Federal Candidate	Support Office Sou	ught: X House District: 06
ENGEL, KIRSTEN, , ,	Oppose Pre	
Calendar Year-To-Date Per Election for Office Sought 1855093	Disbursen 2024	nent For: Primary
		Garior (opoony) F
(a) SUBTOTAL of Itemized Independent Expenditures	······	690372.58
(b) SUBTOTAL of Unitemized Independent Expenditures	······	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committed party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date 09	/ 27 / Y Y Y Y Y Y Y 2024
Signature		

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OF

Schedule E)	LIVI EXI LIVE	TIONES	<u> </u>	AGE 7 OF 53 DR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDEN	ITIFICATION NUMBER ▼
Congressional Leadership Fund	C C00	0504530		
Check if 24-hour report X 48-hour report	New rep	port Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public D	istribution/Dissemination
KAP PRINT LLC			09 /	^D 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 QUINN DRIVE			Amount	
City	State	Zip Code		12248.99
DRIPPING SPRINGS	TX	78620	Transaction ID : Date of Disburse	SE24.542 ement or Obligation
Purpose of Expenditure DIRECT MAIL		Category/ Type 004	09	21 / 2024
Name of Federal Candidate			25.	
DUARTE, JOHN, , ,		Support Oppose		House District: 13 Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		621231.87	Disbursement For: 2024 Other (specified)	Primary ☐ General
Full Name of Payee			Date of Public D	histribution/Dissemination
FLEXPOINT MEDIA INC			09 /	25 2024
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		344394.16
NEW ALBANY	ОН	43054	Transaction ID : S Date of Disburse	SE24.528 ement or Obligation
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004	09 /	2024
Name of Federal Candidate		Support	Office Sought:	House District:13
GRAY, ADAM, , ,		X Oppose		Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	,,,,	621231.87	Disbursement For: 2024 Other (speci	Primary ☐ General
(a) SUBTOTAL of Itemized Independent Expend	itures			356643.15
				-
(b) SUBTOTAL of Unitemized Independent Expe	nditures		>	7
(c) TOTAL Independent Expenditures			>	7
Under penalty of perjury I certify that the independent, or at the request or suggestion of, any can party committee) any political party committee or	didate or authorized			
Crosby, Caleb, , ,		Date	09 / 27	2024
5.g.iataro				

Schedule E)	EXI ENDI	TOTILO	⊢	PAGE 8 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDE	NTIFICATION NUMBER ▼
Congressional Leadership Fund	C	00504530		
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
FLEXPOINT MEDIA INC			09 /	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		80000.00
NEW ALBANY	ОН	43054	Transaction ID Date of Disburs	
Purpose of Expenditure		Category/	M - M /	D D / Y Y Y Y
DIGITAL PLACEMENT		Type 004	09	23 2024
Name of Federal Candidate		Support	Office Sought:	House District: 13
GRAY, ADAM, C, ,		X Oppose	President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	, , ,	621231.87	Disbursement For: 2024 Other (spe	Primary ⊠ General
Full Name of Payee			Date of Public	Distribution/Dissemination
COMPEL LLC			09 /	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 704 KINGSTON PL			Amount	
City	State	Zip Code		13000.00
ALEXANDRIA	VA	22302	Transaction ID Date of Disbur	
Purpose of Expenditure		Category/ 004	M M /	D D / Y Y Y Y Y
MEDIA PRODUCTION		Type 004	09	25 2024
Name of Federal Candidate		Support	Office Sought:	House District: 13
GRAY, ADAM, , ,		X Oppose	President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		621231.87	Disbursement For: 2024 Other (spe	Primary
(a) SUBTOTAL of Itemized Independent Expenditures	3		>	93000.00
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	7
(a) TOTAL Independent Expanditures				
(c) TOTAL Independent Expenditures			*	7
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized			
Crosby, Caleb, , ,		D-t-	09 / 27	2024
Signature		_ Date	00 E/	2021

Schedule E)	TILO	PAGE 9 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC	DENTIFICATION NUMBER ▼
Congressional Leadership Fund	C00504530	
Check if 24-hour report X 48-hour report New report	Amends report filed on	/ D = D / Y = Y = Y
Full Name of Payee	Date of Pub	ic Distribution/Dissemination
P2P MESSAGING	09	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1390 CHAIN BRIDGE ROAD	Amount	
SUITE 54		
	Code	3858.07
MCLEAN VA 221		ID: SE24.648 oursement or Obligation
Purpose of Expenditure	ategory/ 004 09	/ D D / Y Y Y Y Y Y Z Y Z 2024
TEXT MESSAGES	Type 004 09	26 2024
Name of Federal Candidate	Support Office Sought:	X House District: 13
GRAY, ADAM, C, ,	Oppose President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 62	Disbursement For: 2024 Other (s	Primary
Full Name of Payee	Date of Pub	lic Distribution/Dissemination
SWING STRATEGIES	09	25 / 2024
Mailing Address 925 UNIVERSITY AVE	Amount	
City State Zip	Code	36506.51
	825 Transaction	ID : SE24.481 oursement or Obligation
Purpose of Expenditure Ca	ategory/ 004 09	/ D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
DIRECT MAIL	Type 09	10 2024
Name of Federal Candidate	Support Office Sought:	House District: 22
SALAS, RUDY, , ,	Oppose President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought 203	Disbursement For: 2024 Other (s	Primary
	,	. ,,
(a) SUBTOTAL of Itemized Independent Expenditures	······································	40364.58
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
(b) TOTAL mapping the Exponditures	······	4
Under penalty of perjury I certify that the independent expenditures reposition, or at the request or suggestion of, any candidate or authorized comparty committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date 09 / 27	2024
Signature	500 55	النبا ا

Schedule E)	EXI ENDI	TOTILO		PAGE 10 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FE	C IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C00504530			
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	ort filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of P	ublic Distribution/Dissemination
FLEXPOINT MEDIA INC			M 09	
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		637264.85
NEW ALBANY	ОН	43054		ion ID : SE24.505 Disbursement or Obligation
Purpose of Expenditure		Category/	MIN	
MEDIA PLACEMENT		Type 004	09	20 2024
Name of Federal Candidate		Support	Office Sought:	House District: 22
SALAS, RUDY, , ,		X Oppose	President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		2032646.25	Disbursement For 2024 Other	or: Primary X General r (specify) ▶
Full Name of Payee			Date of F	Public Distribution/Dissemination
FLEXPOINT MEDIA INC			M 09	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		102000.00
NEW ALBANY	ОН	43054		on ID : SE24.553 Disbursement or Obligation
Purpose of Expenditure		Category/ 004	M	
DIGITAL PLACEMENT		Type 004	09	23 2024
Name of Federal Candidate		Support	Office Sought:	House District: 22
SALAS, RUDY, , ,		X Oppose	President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought		2032646.25	Disbursement Fo	or: Primary X General r (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.			· •	739264.85
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Crosby, Caleb, , ,		Date	00	27 2024
Signature		_		

boneduic Ly		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	port Amends report file	d on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
KAP PRINT LLC		09 / 25 / 2024
Mailing Address 220 QUINN DRIVE		Amount
City State	Zip Code	26205.98
DRIPPING SPRINGS TX	78620	Transaction ID : SE24.541 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL	Category/ Type 004	09 / 21 / 2024
Name of Federal Candidate	Support Office	ce Sought: X House District: 27
GARCIA, MIKE, , ,	Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	699420.96 Disk 2024	oursement For: Primary
Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination
Mailing Address PO BOX 1051		09 25 2024 Amount
City State	Zip Code	136732.95
NEW ALBANY OH	43054	Transaction ID : SE24.527 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	09 / 20 / Y 2024
Name of Federal Candidate	Support Offic	ce Sought: X House District: 27
WHITESIDES, GEORGE, , ,		President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	699420.96 Dist 202	bursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		162938.93
(b) SUBTOTAL of Unitemized Independent Expenditures	····	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	09 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

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OF

Sc	chedule E)	on one o	PAGE 12 OF 53 FOR SE OF FORM 24/48
NΑ	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
C	Congressional Leadership Fund		C C00504530
Ch	eck if 24-hour report X 48-hour report New rep	port Amends repor	rt filed on
	Full Name of Payee		Date of Public Distribution/Dissemination
	FLEXPOINT MEDIA INC		09 / 25 / Y Y Y Y
	Mailing Address PO BOX 1051		Amount
	City State	Zip Code	84000.00
	NEW ALBANY OH	43054	Transaction ID : SE24.552 Date of Disbursement or Obligation
	Purpose of Expenditure	Category/ 004	M M / D D / Y Y Y Y
	DIGITAL PLACEMENT	Type 004	09 23 2024
	Name of Federal Candidate	Support	Office Sought: House District: 27
	WHITESIDES, GEORGE, , ,	X Oppose	President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought	699420.96	Disbursement For: Primary General 2024 Other (specify) ▶
	Full Name of Payee	'	Date of Public Distribution/Dissemination
	SWING STRATEGIES		M M / D D / Y Y Y Y
	Mailing Address 925 UNIVERSITY AVE		09 25 2024
	925 UNIVERSITY AVE		Amount
	City State	Zip Code	48698.98
	SACRAMENTO CA	95825	Transaction ID : SE24.563 Date of Disbursement or Obligation
	Purpose of Expenditure	Category/ 004	09 23 Y Y Y Y Y
	DIRECT MAIL	Type 504	00 20 2024
	Name of Federal Candidate	Support	Office Sought: House District: 27
	WHITESIDES, GEORGE, , ,	X Oppose	President Senate State: CA
	Calendar Year-To-Date Per Election for Office Sought	699420.96	Disbursement For: Primary X General 2024
	Tot Election for Office cought		Other (specify) -
	(a) SUBTOTAL of Itemized Independent Expenditures		122600.00
	(a) SOBTOTAL OF REMIZED INDEPENDENT Expenditures		132698.98
	(b) SUBTOTAL of Unitemized Independent Expenditures		•
	(c) TOTAL Independent Expenditures		
			7 7
	Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
	Crosby, Caleb, , ,		M M / D D / Y Y Y Y
	Signature	Date	09 27 2024

Schedule E)	LAI LIIDI	TOTIES		PAGE 13 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Congressional Leadership Fund			C	C00504530
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	rt filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	: Distribution/Dissemination
FLEXPOINT MEDIA INC			09	25 / 2024
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		115000.00
NEW ALBANY	ОН	43054	Transaction II Date of Disbu	D: SE24.551 rsement or Obligation
Purpose of Expenditure		Category/ 004	M = M /	D D / Y Y Y Y Y
DIGITAL PLACEMENT		Type 004	09	23 2024
Name of Federal Candidate		Support	Office Sought:	House District: 41
ROLLINS, WILL, , ,		X Oppose	President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	, , ,	550099.93	Disbursement For: 2024 Other (specific	Primary X General ecify) ▶
Full Name of Payee			Date of Public	Distribution/Dissemination
SWING STRATEGIES			09	25 / 2024
Mailing Address 925 UNIVERSITY AVE			Amount	
City	State	Zip Code		45636.10
SACRAMENTO	CA	95825	Transaction ID Date of Disbu	9: SE24.483 Irsement or Obligation
Purpose of Expenditure DIRECT MAIL		Category/ 004	M M /	18 2024
		Туре		
Name of Federal Candidate TRAN, DEREK, , ,		Support	Office Sought:	House District: 45
man, benen, , ,		X Oppose	President	Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	, , , ,	604882.01	Disbursement For: 2024 Other (sp	Primary ⊠ General
-				
(a) SUBTOTAL of Itemized Independent Expenditures	S		· >	160636.10
(b) SUBTOTAL of Unitemized Independent Expenditu	res		•	
(c) TOTAL Independent Expenditures			•	
Under penalty of perjury I certify that the independen with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized			
Crosby, Caleb, , ,		_ Date	09 / 27	2024

oonedale Ly		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	port Amends report file	ed on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC		09 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051		Amount
City State	Zip Code	130000.00
NEW ALBANY OH	43054	Transaction ID : SE24.550 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	09 / 23 / Y 2024
Name of Federal Candidate	Support Offi	ice Sought:
TRAN, DEREK, , ,	X Oppose	President Senate State: CA
Calendar Year-To-Date Per Election for Office Sought	Dis 604882.01 202	
		Other (specify) Data of Bublic Distribution/Discomination
Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051		09 25 2024 Amount
City State	Zip Code	414782.75
NEW ALBANY OH	43054	Transaction ID : SE24.526 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	09 / 20 / Y 2024
Name of Federal Candidate	Support Off	fice Sought: House District: 08
CARAVEO, YADIRA, , ,		President Senate State: CO
Calendar Year-To-Date Per Election for Office Sought	1661932.20 Dis	sbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures		544782.75
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	09 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

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OF

Schedule E)	PAGE 15 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report	Amends report filed on
Full Name of Payee	Date of Public Distribution/Dissemination
CAVALRY LLC	09 25 2024
Mailing Address 1634 EYE STREET NW	Amount
#800	
City State Zip Cod	
WASHINGTON DC 20006	Transaction ID : SE24.583 Date of Disbursement or Obligation
Purpose of Expenditure Categor	gory/ M M / D D / Y Y Y Y
DIGITAL PLACEMENT	Type 004 09 23 2024
Name of Federal Candidate	Support Office Sought: X House District: 08
CARAVEO, YADIRA, , ,	Oppose President Senate State: CO
Calendar Year-To-Date Per Election for Office Sought 1661932	Disbursement For: Primary General 2024 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC	09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051	Amount
City State Zip Coc	ode 80000.00
NEW ALBANY OH 43054	
Purpose of Expenditure Category	
DIGITAL PLACEMENT	Type 09 23 2024
Name of Federal Candidate	Support Office Sought: House District: 01
BOHANNAN, CHRISTINA, , ,	Oppose President Senate State:
Calendar Year-To-Date Per Election for Office Sought 31008	Disbursement For: Primary General Other (specify)
•	
(a) SUBTOTAL of Itemized Independent Expenditures	230000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized committed party committee) any political party committee or its agent.	
Crosby, Caleb, , ,	Date 09 27 2024
Signature	

Schedule E)	AI ENDITORIES	PAGE 16 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report	New report Amends report filed	d on
Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination
		09 / 25 / 2024
Mailing Address PO BOX 1051		Amount
City Sta	te Zip Code	200.00
NEW ALBANY O	·	Transaction ID : SE24.606
Purpose of Expenditure	Category/	Date of Disbursement or Obligation
DIGITAL PRODUCTION	Type 004	09 24 2024
Name of Federal Candidate	Support Offic	e Sought: X House District: 01
BOHANNAN, CHRISTINA, , ,	Oppose	President Senate State: IA
Calendar Year-To-Date	310084.37 Disb	ursement For: Primary X General
Per Election for Office Sought	01000-1.01	U Other (specify) ▶
Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination
PLEAPOINT MEDIA INC		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051		Amount
		Alloun
City	·	214481.25
NEW ALBANY O	H 43054	Transaction ID : SE24.667 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT	Category/ 004	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Type	
Name of Federal Candidate		ce Sought:
BOHANNAN, CHRISTINA, , ,	X Oppose	President Senate State: IA
Calendar Year-To-Date	310084.37 Disb	oursement For: Primary X General
Per Election for Office Sought	310004.37	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	•	214681.25
(b) SUBTOTAL of Unitemized Independent Expenditures.		
(4)	······································	4 4
(c) TOTAL Independent Expenditures	·····	
		75.
Under penalty of perjury I certify that the independent ex	spenditures reported herein were not m	nade in cooperation, consultation, or concert
with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agen	authorized committee or agent of either	
party committee, any position party committee or the agent	ι.	
Crosby, Caleb, , ,	Data	09 27 2024
Signature	Date	2024

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee	Date of Public Distribution/Dissemination
JOHNSON STRATEGIES, LLC	09 25 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 4612 DUSIK LANE	Amount
City State Zip Code	13000.00
AUSTIN TX 78746	Transaction ID : SE24.653 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION Category/ Type 004	09 / 25 / 2024
Name of Federal Candidate Support Office	ce Sought:
BOHANNAN, CHRISTINA, , ,	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Disk 2024	oursement For: Primary ☐ General Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
P2P MESSAGING	09 / 25 / 2024
Mailing Address 1390 CHAIN BRIDGE ROAD	Amount
SUITE 54	- 0.00.40
City State Zip Code MCLEAN VA 22101	2403.12 Transaction ID : SE24.647
Purpose of Expenditure	Date of Disbursement or Obligation
TEXT MESSAGES Category/ Type 004	09 / 25 / 2024
Name of Federal Candidate Support Office	ce Sought:
BOHANNAN, CHRISTINA, , ,	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought Dist 202	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	15403.12
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not n with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Buto	09 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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Sch	nedule E)	oneo	PAGE 18 OF 53 FOR SE OF FORM 24/48
VAN	ME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Co	ongressional Leadership Fund		C C00504530
Che	ck if 24-hour report X 48-hour report New re	port Amends repo	rt filed on
T	Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination
	Mailing Address PO BOX 1051		09 25 7 2024
	S POBONION		Amount
	City State	Zip Code	200191.73
	NEW ALBANY OH	43054	Transaction ID : SE24.525 Date of Disbursement or Obligation
	Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	09 20 / Y Y Y Y
\mathbf{h}	Name of Federal Candidate	Support	Office Sought: House District: 03
	BACCAM, LANON, , ,	Support Oppose	President Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought	969241.16	Disbursement For: Primary
-	Full Name of Payee		Date of Public Distribution/Dissemination
ı	CONVERGENCE MEDIA LLC		M = M / D = D / Y = Y = Y
-	Mailing Address 130 N FAYETTE STREET		09 25 2024
	Mailing Address 130 N FAYETTE STREET		Amount
ŀ	City State	Zip Code	125000.00
	ALEXANDRIA VA	22314	Transaction ID : SE24.585 Date of Disbursement or Obligation
	Purpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	09 21 2024
ŀ	Name of Federal Candidate	Cumport	Office Sought: Y House District: 03
	BACCAM, LANON, , ,	Support Oppose	Office Sought: House District: 03 President Senate State: IA
	Calendar Year-To-Date Per Election for Office Sought	969241.16	Disbursement For: Primary General 2024
	Tel Election of Cinec Gought		Other (specify) -
(a	a) SUBTOTAL of Itemized Independent Expenditures		325191.73
			7 7 7
(k	SUBTOTAL of Unitemized Independent Expenditures		>
(0	c) TOTAL Independent Expenditures		>
W	nder penalty of perjury I certify that the independent expenditures ith, or at the request or suggestion of, any candidate or authorize arty committee) any political party committee or its agent.		
	Crosby, Caleb, , ,	Date	09 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	Signature	Date	

Schedule E)	LAI LIIDI	TOTIES		PAGE 19 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Congressional Leadership Fund			С	C00504530
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y = Y
Full Name of Payee			Date of Pu	blic Distribution/Dissemination
FLEXPOINT MEDIA INC			M 09	¹ 25 ¹ 2024
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		222995.93
NEW ALBANY	ОН	43054		n ID: SE24.666 sbursement or Obligation
Purpose of Expenditure		Category/ 004	M I M	/ D D / Y Y Y Y
MEDIA PLACEMENT		Type 004	09	25 2024
Name of Federal Candidate		Support	Office Sought:	X House District: 03
BACCAM, LANON, , ,		X Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	, , ,	969241.16	Disbursement For 2024 Other	: Primary X General (specify) ▶
Full Name of Payee			Date of Pu	blic Distribution/Dissemination
KAP PRINT LLC			09	/ 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 QUINN DRIVE			Amount	
City	State	Zip Code		13874.91
DRIPPING SPRINGS	TX	78620		n ID : SE24.624 sbursement or Obligation
Purpose of Expenditure		Category/ 004	M = M	/ D D / Y Y Y Y
DIRECT MAIL		Type 004	09	24 2024
Name of Federal Candidate		X Support	Office Sought:	House District: 03
NUNN, ZACH, , ,		Oppose	President	Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	, , , ,	969241.16	Disbursement For 2024 Other	: Primary
				· · · · · · · · · · · · · · · · · · ·
(a) SUBTOTAL of Itemized Independent Expenditures	S		•	236870.84
(b) SUBTOTAL of Unitemized Independent Expenditu	res			
				7
(c) TOTAL Independent Expenditures			•	7 1 7 1 7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	e or authorized			
Crosby, Caleb, , ,		_ Date	09 / 27	
Signature				

oonedale Ly		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	port Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC		09 / 25 / 2024
Mailing Address PO BOX 1051		Amount
City State	Zip Code	189034.09
NEW ALBANY OH	43054	Transaction ID : SE24.524 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Offi	ice Sought: X House District: 02
GOLDEN, JARED, , ,	X Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	Dis 479569.27 202	
		Other (specify)
Full Name of Payee STARBOARD ADVERTISING		Date of Public Distribution/Dissemination
Mailing Address 16192 COASTAL HIGHWAY		09 25 2024 Amount
City State	Zip Code	85000.00
LEWES DE	19958	Transaction ID : SE24.572 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	09 / 23 / Y 2024
Name of Federal Candidate	Support Off	fice Sought: House District: 02
GOLDEN, JARED, , ,		President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	479569.27 Dis 202	sbursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures		274034.09
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	7
(c) TOTAL Independent Expenditures	—	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	09 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

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Schedule E)	EXI ENDI	TOTIES		PAGE 21 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Congressional Leadership Fund			С	C00504530
Check if 24-hour report X 48-hour report	X New repo	ort Amends repo	rt filed on	/ D = D / Y = Y = Y
Full Name of Payee			Date of Pub	olic Distribution/Dissemination
FLEXPOINT MEDIA INC			09	/ 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		172046.25
NEW ALBANY	ОН	43054		ID: SE24.665 bursement or Obligation
Purpose of Expenditure		Category/ 004	M I M	/ D D / Y Y Y Y Y
MEDIA PLACEMENT		Type 004	09	25 2024
Name of Federal Candidate		Support	Office Sought:	House District: 02
GOLDEN, JARED, , ,		X Oppose	President	Senate State: ME
Calendar Year-To-Date Per Election for Office Sought		479569.27	Disbursement For: 2024 Other (s	Primary ⊠ General
Full Name of Payee			Date of Pub	olic Distribution/Dissemination
P2P MESSAGING			09	/ 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1390 CHAIN BRIDGE ROAD			Amount	
SUITE 54			Amount	
City	State	Zip Code		838.02
MCLEAN	VA	22101		ÍD: SE24.646 bursement or Obligation
Purpose of Expenditure TEXT MESSAGES		Category/ Type 004	M 09	/ 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office Sought:	House District: 02
GOLDEN, JARED, , ,		X Oppose	President	Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	7	479569.27	Disbursement For: 2024 Other (Primary
(a) SUBTOTAL of Itemized Independent Expenditures.				172884.27
(-)				172001.27
(b) SUBTOTAL of Unitemized Independent Expenditure	es		• •	
(c) TOTAL Independent Expenditures			·	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Crosby, Caleb, , ,		_ Date	09 / 27	2024
-				

Schedule E)	A ENDITORIES	PAGE 22 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report	New report Amends repo	rt filed on
Full Name of Payee		Date of Public Distribution/Dissemination
STARBOARD ADVERTISING		09 / 25 / Y Y Y Y
Mailing Address 16192 COASTAL HIGHWAY		Amount
City Stat	e Zip Code	950.00
LEWES DE	19958	Transaction ID : SE24.639 Date of Disbursement or Obligation
Purpose of Expenditure	Category/ 004	M M / D D / Y Y Y Y Y
DIGITAL PRODUCTION	Type 004	09 25 2024
Name of Federal Candidate	Support	Office Sought: House District: 02
GOLDEN, JARED, , ,	Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	479569.27	Disbursement For:
Full Name of Payee		Date of Public Distribution/Dissemination
THE HEREFORD AGENCY		09 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 908 KING ST		Amount
STE 100		
City	•	13000.00
ALEXANDRIA V/	22314	Transaction ID : SE24.649 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type 004	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support	Office Sought: House District: 02
GOLDEN, JARED, , ,	Oppose	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought	479569.27	Disbursement For: Primary General 2024 General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		13950.00
(a) CODICE OF NOTIFICE MADE OF A CAMPAINA COMMITTEE OF THE CAMPAINA COMPAINA COMMITTEE OF THE CAMPAINA COMMITTEE OF THE CA		13330.00
(b) SUBTOTAL of Unitemized Independent Expenditures.		>
(c) TOTAL Independent Expenditures		•
Under penalty of perjury I certify that the independent ex with, or at the request or suggestion of, any candidate or party committee) any political party committee or its agent	authorized committee or agent o	
Crosby, Caleb, , ,	Date	09 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
-		

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report Amends report filed of	on M = M / D = D / Y = Y = Y
	Date of Public Distribution/Dissemination
KAP PRINT LLC	09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 QUINN DRIVE	Amount
City State Zip Code	18700.91
DRIPPING SPRINGS TX 78620	Transaction ID : SE24.547 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL Category/ Type 004	09 / 21 / 2024
Name of Federal Candidate Support Office	Sought:
THERIALII T ALISTINI	President Senate State: ME
Calendar Year-To-Date Per Election for Office Sought Disburs 2024	sement For: Primary
Full Name of Payee	
CAVALRY LLC	Date of Public Distribution/Dissemination 09 25 2024
Mailing Address 1634 EYE STREET NW	Amount
#800	25000.00
	25000.00 Transaction ID : SE24.581
Purpose of Expenditure	Date of Disbursement or Obligation
DIGITAL PLACEMENT Category/ Type 004	09 23 2024
Name of Federal Candidate Support Office	Sought:
BARRETT, THOMAS, M, , Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought Disburs 2024	resement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	43700.91
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not mad with, or at the request or suggestion of, any candidate or authorized committee or agent of either, party committee) any political party committee or its agent.	
Crosby, Caleb, , , Date 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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Schedule E)	EXI ENDI	TOTILO		PAGE 24 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund				C C00504530
Check if 24-hour report X 48-hour report	X New repo	ort Amends re	port filed	on M = M / D = D / Y = Y = Y
Full Name of Payee				Date of Public Distribution/Dissemination
RED MAVERICK MEDIA LLC				09 25 2024
Mailing Address 1426 N. 3RD STREET				Amount
SUITE 310				
1 ′		Zip Code		16613.00
HARRISBURG	PA	17102		Transaction ID: SE24.618 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL		Category/ Type 00	4	M 09 / 24 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office	Sought: X House District:07
BARRETT, THOMAS, M, ,		Oppose		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought		1273341.45	Disbur 2024	rsement For: Primary
Full Name of Payee				Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC				09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051				Amount
City	tate	Zip Code		461250.00
	ОН	43054		Transaction ID : SE24.523 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004	4	09 / 20 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate		Support	Office	Sought: X House District: 07
HERTEL, CURTIS, , ,		X Oppose		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	,	1273341.45	Disbur 2024	rsement For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures				477863.00
(L) COLUMN S. NONIESS MESSPONSON E ., P ONIENCIO				4,1000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	S		····· ▶	1 4 1 4 1 6
(c) TOTAL Independent Expenditures			····· >	
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized			
Crosby, Caleb, , ,		_ Da	ate 09	
3				

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NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	ort Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
CAVALRY LLC		09 25 2024
Mailing Address 1634 EYE STREET NW #800		Amount
City State	Zip Code	130000.00
WASHINGTON DC	20006	Transaction ID : SE24.580 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	ce Sought: X House District:07
HERTEL, CURTIS, , ,	X Oppose	President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	1273341.45 Dist 2024	
Full Name of Payer		Other (specify)
Full Name of Payee KAP PRINT LLC		Date of Public Distribution/Dissemination 09 09 09 09 09
Mailing Address 220 QUINN DRIVE		Amount
City State	Zip Code	19455.96
DRIPPING SPRINGS TX	78620	Transaction ID : SE24.627 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL	Category/ Type 004	09 / 24 / 2024
Name of Federal Candidate	Support Offic	ce Sought: X House District: 08
JUNGE, PAUL, , ,		President Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	971500.79 Dist 202	oursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		149455.96
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	09 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

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OF

Schedule E)	I EXI END	TOTILO		PAGE 26 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Congressional Leadership Fund			C	C00504530
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	ort filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
FLEXPOINT MEDIA INC			09	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		201628.06
NEW ALBANY	ОН	43054	Transaction II Date of Disbu	D: SE24.506 rsement or Obligation
Purpose of Expenditure		Category/	M - M /	D D / Y Y Y Y
MEDIA PLACEMENT		Type 004	09	20 2024
Name of Federal Candidate		Support	Office Sought:	House District: 08
MCDONALD RIVET, KRISTEN, , ,		X Oppose	President	Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	7	971500.79	Disbursement For: 2024 Other (spe	Primary ☐ General
Full Name of Payee			Date of Public	: Distribution/Dissemination
FLEXPOINT MEDIA INC			M M /	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		125000.00
NEW ALBANY	ОН	43054	Transaction ID Date of Disbu	
Purpose of Expenditure		Category/ 004	M = M /	D D / Y Y Y Y
DIGITAL PLACEMENT		Type 004	09	23 2024
Name of Federal Candidate		Support	Office Sought:	House District: 08
MCDONALD RIVET, KRISTEN, , ,		Oppose	President	Senate State: MI
Calendar Year-To-Date Per Election for Office Sought	7	971500.79	Disbursement For: 2024 Other (spe	Primary
(a) CURTOTAL of Housingd Indoordant Fundadity	_			000000
(a) SUBTOTAL of Itemized Independent Expenditure	÷S		-	326628.06
(b) SUBTOTAL of Unitemized Independent Expendit	ures		. >	
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independed with, or at the request or suggestion of, any candidate party committee) any political party committee or its	ite or authorized			
Crosby, Caleb, , ,		_ Date	09 / 27	2024
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NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	oort Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
KAP PRINT LLC		09 / 25 / 2024
Mailing Address 220 QUINN DRIVE		Amount
City State	Zip Code	19575.14
DRIPPING SPRINGS TX	78620	Transaction ID : SE24.545 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL	Category/ Type 004	09 / 21 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate	Support Office	ce Sought: X House District: 01
BUCKHOUT, LAURIE, , ,	Oppose	President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought	1645656.01 Disb 2024	oursement For: Primary X General Other (specify) ▶
Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination
Malling Address		09 25 2024
Mailing Address PO BOX 1051		Amount
City State	Zip Code	740975.06
NEW ALBANY OH	43054	Transaction ID : SE24.508 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	09 / 20 / 2024
Name of Federal Candidate	Support Office	ce Sought: House District: 01
DAVIS, DON, , ,		President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought		oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		760550.20
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	09 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		

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Schedule E)		PAGE 28 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDE	NTIFICATION NUMBER ▼
Congressional Leadership Fund	Cc	00504530
Check if 24-hour report X 48-hour report New report	Amends report filed on	D D / Y Y Y Y
Full Name of Payee	Date of Public	Distribution/Dissemination
CAVALRY LLC	M M /	25 / 2024
Mailing Address 1634 EYE STREET NW	Amount	
#800		
City State Zip Co	ode	85000.00
WASHINGTON DC 20006		: SE24.579 sement or Obligation
Purpose of Expenditure Cate		23 2024
DIGITAL PLACEMENT	Type 004 09	23 2024
Name of Federal Candidate	Support Office Sought:	House District: 01
DAVIS, DON, , ,	Oppose President	Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 164569	Disbursement For: 2024 Other (spe	Primary
Full Name of Payee	Date of Public	Distribution/Dissemination
KAP PRINT LLC	M M /	25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 220 QUINN DRIVE	Amount	
City State Zip Co	ode	22615.31
DRIPPING SPRINGS TX 78620	Transaction ID	
Purpose of Expenditure Category	gory/	D D / Y Y Y Y
	Type 004 09 09	21 2024
Name of Federal Candidate	Support Office Sought:	House District: 02
BACON, DON, , ,	Oppose President	Senate State: NE
Calendar Year-To-Date Per Election for Office Sought 14516	Disbursement For: 2024 Other (spe	Primary
•		
(a) SUBTOTAL of Itemized Independent Expenditures	······	107615.31
(b) SUBTOTAL of Unitemized Independent Expenditures	······	4
(c) TOTAL Independent Expenditures		
(-)	P	4
Under penalty of perjury I certify that the independent expenditures reported with, or at the request or suggestion of, any candidate or authorized community committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date 09 27	/ Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	Date 09 27	2027

Schedule E)	LAFENDII	UNLS		PAGE 29 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund				C C00504530
				M / D D / Y Y Y Y
Check if 24-hour report X 48-hour report	X New repor	t Amends repor	rt filed on	
Full Name of Payee			Date of	f Public Distribution/Dissemination
FLEXPOINT MEDIA INC			M	09 25 / 2024
Mailing Address PO BOX 1051			Amour	nt
City	tate Z	Zip Code		250714.28
NEW ALBANY		43054		action ID : SE24.510 If Disbursement or Obligation
Purpose of Expenditure		Category/		M / D D / Y Y Y
MEDIA PLACEMENT		Type 004		09 20 2024
Name of Federal Candidate		Support	Office Sough	: X House District: 02
VARGAS, ANTHONY 'TONY', , ,		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	, 1	451684.75	Disbursement 2024 Of	For: Primary X General her (specify) ►
Full Name of Payee			Date of	of Public Distribution/Dissemination
CONVERGENCE MEDIA LLC			ТМ	09 25 Y 2024
Mailing Address 130 N FAYETTE STREET			Amou	nt
City	State Z	Zip Code	— I	163750.00
1 '		22314		ction ID : SE24.586 of Disbursement or Obligation
Purpose of Expenditure		Category/ 004	- M	M / D D / Y Y Y
DIGITAL PLACEMENT		Type 004		09 21 2024
Name of Federal Candidate		Support	Office Sough	t: X House District: 02
VARGAS, ANTHONY 'TONY', , ,		X Oppose	Preside	
Calendar Year-To-Date Per Election for Office Sought	1	451684.75	Disbursemen 2024 O	t For: Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures			•	414464.28
(b) SUBTOTAL of Unitemized Independent Expenditures	s			
				7 7 7
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate of party committee) any political party committee or its age	or authorized of			
Crosby, Caleb, , , Signature		Date	M M /	27 / 2024

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report Amends report	filed on M M M / D D / Y Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
CAVALRY LLC	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 1634 EYE STREET NW	Amount
#800	
City State Zip Code WASHINGTON DC 20006	90000.00 Transaction ID : SE24.578 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT Category/ Type 004	09 23 7 2024
Name of Federal Candidate Support C	Office Sought: X House District: 02
VASQUEZ, GABRIEL, , ,	President Senate State: NM
	Disbursement For: Primary
Full Name of Payee	Date of Public Distribution/Dissemination
SOMETHING ELSE STRATEGIES, LLC	09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 212 GOLDEN WILLOW COURT	Amount
City State Zip Code	13000.00
EASLEY SC 29642	Transaction ID : SE24.614 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION Category/ Type 004	09 / 24 / 2024
Name of Federal Candidate Support	Office Sought:
VASQUEZ, GABRIEL, , ,	President Senate State: NM
	Disbursement For: Primary X General 2024 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	103000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of exparty committee) any political party committee or its agent.	
Crosby, Caleb, , , Signature Date	09 27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	ort Amends report file	ed on Mam / Dad / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC		09 / 25 / 2024
Mailing Address PO BOX 1051		Amount
City State	Zip Code	7492.33
NEW ALBANY OH	43054	Transaction ID : SE24.660 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	09 / 25 / Y 2024
Name of Federal Candidate	Support Off	fice Sought:
VASQUEZ, GABRIEL, , ,	X Oppose	President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	362484.28 Dis 202	
		Other (specify) Data of Bublic Distribution/Discomination
Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination
Mailing Address PO BOX 1051		09 25 2024 Amount
City State	Zip Code	249859.13
NEW ALBANY OH	43054	Transaction ID : SE24.661 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	09 / 25 / 2024
Name of Federal Candidate	Support Off	fice Sought: House District: 02
VASQUEZ, GABRIEL, , ,		President Senate State: NM
Calendar Year-To-Date Per Election for Office Sought	Dis	sbursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	>	257351.46
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	7 7 7
(c) TOTAL Independent Expenditures	—	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	M = M / D = D / Y = Y = Y = Y = Y = Y = Y = Y = Y = Y
Signature		

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	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report Amends report	filed on M M / D D / Y Y Y Y Y
Full Name of Payee	Date of Public Distribution/Dissemination
P2P MESSAGING	09 25 2024
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54	Amount
City State Zip Code	2132.82
MCLEAN VA 22101	Transaction ID : SE24.645 Date of Disbursement or Obligation
Purpose of Expenditure TEXT MESSAGES Category/ Type 004	09 / 25 / 2024
Name of Federal Candidate Support	Office Sought: House District: 02
VASQUEZ, GABRIEL, , ,	President Senate State: NM
	Disbursement For: Primary ☐ General Other (specify) ►
Full Name of Payee	Date of Public Distribution/Dissemination
KAP PRINT LLC	09 25 2024
Mailing Address 220 QUINN DRIVE	Amount
City State Zip Code	34289.72
DRIPPING SPRINGS TX 78620	Transaction ID : SE24.543 Date of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL Category/ Type 004	09 / 21 / 2024
Name of Federal Candidate Support	Office Sought:
D'ESPOSITO, ANTHONY, , ,	President Senate State: NY
	Disbursement For: Primary General 2024 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	36422.54
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were no with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Crosby, Caleb, , , Date	M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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Schedule E)	EXI END	TONES		PAGE 33 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC ID	ENTIFICATION NUMBER ▼
Congressional Leadership Fund			C	C00504530
Check if 24-hour report X 48-hour report	New repo	ort Amends repo	ort filed on	D = D / Y = Y = Y
Full Name of Payee			Date of Public	Distribution/Dissemination
FLEXPOINT MEDIA INC			M 09 /	25 / 2024
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		166684.68
NEW ALBANY	ОН	43054	Transaction I Date of Disbu	D: SE24.512 irsement or Obligation
Purpose of Expenditure		Category/ 004	M = M /	D D / Y Y Y Y Y
MEDIA PLACEMENT		Type 004	09	20 2024
Name of Federal Candidate		Support	Office Sought:	House District: 17
JONES, MONDAIRE, , ,		X Oppose	President	Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	, , ,	1712946.88	Disbursement For: 2024 Other (sp	Primary X General ecify) ▶
Full Name of Payee			Date of Public	c Distribution/Dissemination
STARBOARD ADVERTISING			09	25 / Y Y Y Y Y Y Y
Mailing Address 16192 COASTAL HIGHWAY			Amount	
City	State	Zip Code		106000.00
LEWES	DE	19958	Transaction ID Date of Disbu	D: SE24.567 ursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT		Category/ Type 004	M 09 /	23 2024
Name of Federal Candidate				4 2 17
JONES, MONDAIRE, , ,		Support Oppose	Office Sought:	House District: 17 Senate State: NY
Calendar Year-To-Date Per Election for Office Sought		1712946.88	Disbursement For: 2024	Primary General
	, ,		Other (sp	pecify)
(a) SUBTOTAL of Itemized Independent Expenditures	S		•	272684.68
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres			
			7	4 4
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independer with, or at the request or suggestion of, any candidat party committee) any political party committee or its a	e or authorized			
Crosby, Caleb, , , Signature		_ Date	9 09 27	2024
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	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report Amends report file	ed on Man / Dad / Yayayay
Full Name of Payee	Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC	09 25 2024
Mailing Address PO BOX 1051	Amount
City State Zip Code	579846.60
NEW ALBANY OH 43054	Transaction ID : SE24.663 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category/ Type 004	09 / 25 / 2024
Name of Federal Candidate Support Offi	ce Sought: X House District: 17
JONES, MONDAIRE, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Dis 202	bursement For: Primary X General 4 Other (specify) ▶
Full Name of Payee P2P MESSAGING	Date of Public Distribution/Dissemination
121 WESSAGING	09 / 25 / 2024
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54	Amount
City State Zip Code	924.21
MCLEAN VA 22101	Transaction ID : SE24.644 Date of Disbursement or Obligation
Purpose of Expenditure TEXT MESSAGES Category/ Type 004	09 / 25 / Y 2024
Name of Federal Candidate Support Offi	ice Sought:
JONES, MONDAIRE, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought Dis 202	bursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	580770.81
(b) SUBTOTAL of Unitemized Independent Expenditures	1 4 1 4 1 6
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not r with, or at the request or suggestion of, any candidate or authorized committee or agent of eith party committee) any political party committee or its agent.	
Date	09 27 2024
Signature	

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Schedule E)	II EXI END	TIONES		GE 35 OF 53 OR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC IDEN	TIFICATION NUMBER ▼
Congressional Leadership Fund			C coo	0504530
Check if 24-hour report X 48-hour report	New rep	port Amends repo	rt filed on)
Full Name of Payee			Date of Public Di	stribution/Dissemination
SOMETHING ELSE STRATEGIES, LLC			M M / 1	25 2024
Mailing Address 212 GOLDEN WILLOW COURT			Amount	
City	State	Zip Code		3000.00
EASLEY	SC	29642	Transaction ID : Date of Disburse	SE24.654 ment or Obligation
Purpose of Expenditure		Category/ 004		25 / Y Y Y Y
MEDIA PRODUCTION		Type 004	09	25 2024
Name of Federal Candidate		Support	Office Sought:	House District: 17
JONES, MONDAIRE, , ,		Oppose	President S	Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	, , ,	1712946.88	Disbursement For: 2024 Other (specif	Primary
Full Name of Payee			Date of Public Di	istribution/Dissemination
FLEXPOINT MEDIA INC			09	25 / 2024
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code		75567.97
NEW ALBANY	ОН	43054	Transaction ID : S Date of Disburse	SE24.514 ment or Obligation
Purpose of Expenditure MEDIA PLACEMENT		Category/ Type 004	09	20 / 2024
Name of Federal Candidate		Support	Office Sought: X	House District: 18
ESPOSITO, ALISON, , ,		Oppose		Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	7	1020208.26	Disbursement For: 2024 Other (specif	Primary
(a) SUBTOTAL of Itemized Independent Expenditur	es		•	78567.97
(b) SUBTOTAL of Unitemized Independent Expendi	tures			
			7	49. 45.
(c) TOTAL Independent Expenditures			•	4
Under penalty of perjury I certify that the independ with, or at the request or suggestion of, any candid- party committee) any political party committee or its	ate or authorized			
Crosby, Caleb, , ,		Date	09 / 27	2024
•				

		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New report	Amends report filed on	M = M / D = D / Y = Y = Y
Full Name of Payee	Date	of Public Distribution/Dissemination
STARBOARD ADVERTISING		09 25 2024
Mailing Address 16192 COASTAL HIGHWAY	Amou	unt
City State Zip (Code	57500.00
LEWES DE 1999		saction ID : SE24.568 of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT Car		09 23 2024
Name of Federal Candidate	X Support Office Sough	nt: X House District: 18
ESPOSITO, ALISON, , ,	Oppose Presid	lent Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	Disbursemer 2024	nt For:
Full Name of Payee FLEXPOINT MEDIA INC	Date	of Public Distribution/Dissemination
Mailing Address PO BOX 1051	Amou	09 25 2024 unt
City State Zip	Code	75567.97
NEW ALBANY OH 430	54 Trans	action ID : SE24.515 of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Car		09 20 / 2024
Name of Federal Candidate	Support Office Soug	ht: X House District: 18
RYAN, PATRICK, , ,	Oppose Presid	dent Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	Disburseme 2024	nt For:
(a) SUBTOTAL of Itemized Independent Expenditures	· ·	133067.97
(b) SUBTOTAL of Unitemized Independent Expenditures		7 1 7 1 7 1
(c) TOTAL Independent Expenditures	······································	
Under penalty of perjury I certify that the independent expenditures repo with, or at the request or suggestion of, any candidate or authorized com- party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date 09	27 2024
Signature		

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	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report Amends report	t filed on
Full Name of Payee	Date of Public Distribution/Dissemination
STARBOARD ADVERTISING	09 25 / Y Y Y Y Y
Mailing Address 16192 COASTAL HIGHWAY	Amount
City State Zip Code	57500.00
LEWES DE 19958	Transaction ID : SE24.569 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT Category/ Type 004	M 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Federal Candidate Support	Office Sought: House District:18
RYAN, PATRICK, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary
Full Name of Payee NEBO MEDIA, INC.	Date of Public Distribution/Dissemination
Mailing Address PO BOX 3033	09 25 2024 Amount
City State Zip Code	379125.60
ARLINGTON VA 22203	Transaction ID : SE24.537 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category/ Type 004	09 / 19 / 2024
Name of Federal Candidate Support	Office Sought: House District: 19
RILEY, JOSH, , ,	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought 1860123.39	Disbursement For: ☐ Primary ☐ General 2024 ☐ Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	436625.60
(b) SUBTOTAL of Unitemized Independent Expenditures	>
(c) TOTAL Independent Expenditures	•
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent of party committee) any political party committee or its agent.	
Crosby, Caleb, , , Signature Date	09 27 2024
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ooneddie Ej		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New report	ort Amends report filed	d on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
STARBOARD ADVERTISING		09 25 2024
Mailing Address 16192 COASTAL HIGHWAY		Amount
City State	Zip Code	125000.00
LEWES DE	19958	Transaction ID : SE24.570 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	09 / D D / 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: 19
RILEY, JOSH, , ,	Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	1860123.39 Disb 2024	
Full Name of Payer		Other (specify)
Full Name of Payee FLEXPOINT MEDIA INC		Date of Public Distribution/Dissemination 09 09 09 09 09 09
Mailing Address PO BOX 1051		Amount
City State	Zip Code	279282.26
NEW ALBANY OH	43054	Transaction ID : SE24.516 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	09 / 20 / 2024
Name of Federal Candidate	Support Office	ce Sought: X House District: 22
MANNION, JOHN, , ,		President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	549615.74 Disk 202	oursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	>	404282.26
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	_ Date	09 27 2024
Signature		

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ooneddie Ly		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	ort Amends report file	d on M = M / D = D / Y = Y = Y
Full Name of Payee		Date of Public Distribution/Dissemination
STARBOARD ADVERTISING		09 25 2024
Mailing Address 16192 COASTAL HIGHWAY		Amount
City State	Zip Code	65000.00
LEWES DE	19958	Transaction ID : SE24.575 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	09 / 23 / 2024
Name of Federal Candidate	Support Office	ce Sought: X House District: 22
MANNION, JOHN, W, ,	X Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	549615.74 Disk 2024	oursement For: Primary
Full Name of Payee KAP PRINT LLC		Date of Public Distribution/Dissemination
Mailing Address 220 QUINN DRIVE		Amount 25 2024
City State	Zip Code	24755.90
DRIPPING SPRINGS TX	78620	Transaction ID : SE24.544
Purpose of Expenditure DIRECT MAIL	Category/ Type 004	Date of Disbursement or Obligation M 09 21 2024
Name of Federal Candidate	Support Office	ce Sought: X House District: 22
WILLIAMS, BRANDON, , ,	Oppose	President Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	549615.74 Disl 202	oursement For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures	>	89755.90
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	· · · · · · · · · · · · · · · · · · ·	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	09 Z7 Z024
Signature		

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OF

Schedule E)	I EXI END	ITOTILO	PAGE 40 OF FOR SE OF FORM	53 24/48
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUM	/IBER ▼
Congressional Leadership Fund			C C00504530	
Check if 24-hour report X 48-hour report	New rep	ort Amends repo	rt filed on	YY
Full Name of Payee			Date of Public Distribution/Dissemi	nation
FLEXPOINT MEDIA INC			M = M / D = D / Y = Y	24
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code	26458	2.22
NEW ALBANY	ОН	43054	Transaction ID : SE24.517 Date of Disbursement or Obligatio	
Purpose of Expenditure		Category/		YYY
MEDIA PLACEMENT		Type 004		024
Name of Federal Candidate		Support	Office Sought: X House District:	09
KAPTUR, MARCY, , ,		X Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought	, , ,	1286526.00	Disbursement For:	General
Full Name of Payee			Date of Public Distribution/Dissem	ination
FLEXPOINT MEDIA INC				024
Mailing Address PO BOX 1051			Amount	
City	State	Zip Code	13000	00.00
NEW ALBANY	ОН	43054	Transaction ID : SE24.559 Date of Disbursement or Obligatio	
Purpose of Expenditure		Category/ 004	M = M / D = D / Y = Y	YYY
DIGITAL PLACEMENT		Type 004	09 23 20)24
Name of Federal Candidate		Support	Office Sought: House District:	09
KAPTUR, MARCY, , ,		X Oppose	President Senate State:	
Calendar Year-To-Date Per Election for Office Sought	, ,	1286526.00	Disbursement For: Primary X 2024 Other (specify) ▶	General
(a) CURTOTAL of howevered belongered as Function	_		20.450	
(a) SUBTOTAL of Itemized Independent Expenditure	·S		394582	2.22
(b) SUBTOTAL of Unitemized Independent Expendit	ures		· -	
(c) TOTAL Independent Expenditures			•	-
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	te or authorized			
Crosby, Caleb, , ,		_ Date	09 27 2024	
Signature				

Schedule E)	EXI ENDI	TOTILO		PAGE 41 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund				C C00504530
Check if 24-hour report X 48-hour report	X New repo	ort Amends repo		M / D = D / Y = Y = Y
Full Name of Payee			Date o	f Public Distribution/Dissemination
FLEXPOINT MEDIA INC				09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051			Amour	nt
City	State	Zip Code		25000.00
NEW ALBANY	ОН	43054		action ID : SE24.558 f Disbursement or Obligation
Purpose of Expenditure		Category/		M / D D / Y Y Y Y
DIGITAL PLACEMENT		Type 004	_	09 23 2024
Name of Federal Candidate		X Support	Office Sought	: X House District:09
MERRIN, DEREK, , ,		Oppose	Preside	nt Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		1286526.00	Disbursement 2024 Ot	For: Primary X General her (specify) ▶
Full Name of Payee			Date of	of Public Distribution/Dissemination
FLEXPOINT MEDIA INC				09 25 2024
Mailing Address PO BOX 1051			Amou	nt
City	State	Zip Code		424502.21
NEW ALBANY	ОН	43054		ction ID : SE24.518 of Disbursement or Obligation
Purpose of Expenditure		Category/ 004	М	09 / 20 / Y Y Y Y Y
MEDIA PLACEMENT		Type 004		
Name of Federal Candidate SYKES, EMILIA, , ,		Support	Office Sough	t: House District: 13 OH
611(26, 2111(21), , , ,		X Oppose	Preside	ent Senate State:
Calendar Year-To-Date Per Election for Office Sought		585252.79	Disbursement 2024 Of	t For: Primary X General
(a) SUBTOTAL of Itemized Independent Expenditures.			· •	449502.21
(b) SUBTOTAL of Unitemized Independent Expenditure	es			
(c) TOTAL Independent Expenditures			· •	7 7 7
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Crosby, Caleb, , ,		_ Date	09 /	27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature				

Schedule E)	PAGE 42 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report Ne	ew report Amends report filed on Amends report
Full Name of Payee	Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC	09 / D D / Y Y Y Y Y Y Z 2024
Mailing Address PO BOX 1051	Amount
City State	Zip Code 145000.00
NEW ALBANY OH	43054 Transaction ID : SE24.557 Date of Disbursement or Obligation
Purpose of Expenditure	Category/ OO4 M / D D / Y Y Y Y
DIGITAL PLACEMENT	Type 004 09 23 2024
Name of Federal Candidate	Support Office Sought: X House District: 13
SYKES, EMILIA, , ,	Oppose President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2024 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
FP1 STRATEGIES, LLC	09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 3001 WASHINGTON BLVD	Amount
7TH FLOOR	Amount
City State	Zip Code 13000.00
ARLINGTON VA	Transaction ID : SE24.591 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type 004 09 09 23 7 2024
Name of Federal Candidate	Support Office Sought: House District: 13
SYKES, EMILIA, , ,	Oppose President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary ☐ General 2024 Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	158000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	• • • • • • • • • • • • • • • • • • •
	ditures reported herein were not made in cooperation, consultation, or concert norized committee or agent of either, or (if the reporting entity is not a political
Crosby, Caleb, , ,	Date 09 27 2024
Signature	

Schedule E)		PAGE 43 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New rep	port Amends report fil	ed on M M / D D / Y Y Y Y Y
Full Name of Payee		Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC		09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051		Amount
City State	Zip Code	800.00
NEW ALBANY OH	43054	Transaction ID : SE24.608 Date of Disbursement or Obligation
Purpose of Expenditure	Category/ 004	M M / D D / Y Y Y Y
DIGITAL PRODUCTION	Type 004	09 24 2024
Name of Federal Candidate	Support Off	rice Sought: X House District: 13
SYKES, EMILIA, , ,	Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought	585252.79 Dis	sbursement For: Primary X General Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
P2P MESSAGING		09 / 25 / 2024
Mailing Address 1390 CHAIN BRIDGE ROAD		Amount
SUITE 54		Amount
City State	Zip Code	1950.58
MCLEAN VA	22101	Transaction ID : SE24.643 Date of Disbursement or Obligation
Purpose of Expenditure TEXT MESSAGES	Category/ Type 004	09 25 / 2024
Name of Federal Candidate	Support Of	fice Sought: House District: 13
SYKES, EMILIA, , ,	X Oppose	President Senate State: OH
Calendar Year-To-Date Per Election for Office Sought		sbursement For: Primary
	·	
(a) SUBTOTAL of Itemized Independent Expenditures		2750.58
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Crosby, Caleb, , , Signature	Date	09 / 27 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y

	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report Amends rep	port filed on
Full Name of Payee	Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC	09 / 25 / 2024
Mailing Address PO BOX 1051	Amount
City State Zip Code	445442.96
NEW ALBANY OH 43054	Transaction ID : SE24.519 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PLACEMENT Category/ Type 004	M M / D D / Y Y Y
Name of Federal Candidate Support	Office Sought: House District: 05
BYNUM, JANELLE, , , , Dippose	President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary ☐ General 2024 Other (specify) ▶
Full Name of Payee	Date of Public Distribution/Dissemination
FLEXPOINT MEDIA INC	09 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051	Amount
City State Zip Code	140000.00
NEW ALBANY OH 43054	Transaction ID : SE24.556 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT Category/ Type 004	M M / D D / Y Y Y
Name of Federal Candidate Support	Office Sought: X House District: 05
BYNUM, JANELLE, , ,	President Senate State: OR
Calendar Year-To-Date Per Election for Office Sought 1681715.68	Disbursement For: Primary General 2024 General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	585442.96
(b) SUBTOTAL of Unitemized Independent Expenditures	··· >
(c) TOTAL Independent Expenditures	···· >
Under penalty of perjury I certify that the independent expenditures reported herein were with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	
Crosby, Caleb, , , Da	te 09 27 2024
Signature	

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NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y
	of Public Distribution/Dissemination
	09 25 2024
Mailing Address 1426 N. 3RD STREET Amou	unt
SUITE 310 City State Zip Code	26280.00
HARRISBURG PA 17102 Trans	saction ID : SE24.628 of Disbursement or Obligation
Purpose of Expenditure	09 / 24 / Y 2024
Name of Federal Candidate Support Office Sough	ht: X House District:05
CHAVEZ-DEREMER, LORI, , , Oppose Presid	
Calendar Year-To-Date Per Election for Office Sought Disbursement 2024	
Tel Election for Office Sought	Other (specify)
RED MAVERICK MEDIA LLC	of Public Distribution/Dissemination
Mailing Address 1426 N. 3RD STREET	09 25 2024
SUITE 310	unt
City State Zip Code	18225.00
	action ID : SE24.622 of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL Category/ Type 004	M 09 / 24 / Y 2024
Name of Federal Candidate Support Office Soug	ht: X House District: 07
MACKENZIE, RYAN, , , Oppose President	dent Senate State: PA
Calendar Year-To-Date Per Election for Office Sought Disbursement 2024	ont For: Primary X General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures	44505.00
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7 1
(c) TOTAL Independent Expenditures	1 7 1 1 7 1 1 7 1
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Crosby, Caleb, , ,	27 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

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Schedule E)	EXI ENDI	TOTILO		PAGE 46 OF 53 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund				C C00504530
Check if 24-hour report X 48-hour report	New repo	ort Amends repo		M / D = D / Y = Y = Y
Full Name of Payee			Date o	f Public Distribution/Dissemination
FLEXPOINT MEDIA INC				09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO BOX 1051			Amour	nt
City	State	Zip Code	- [398884.39
	ОН	43054		action ID : SE24.520 f Disbursement or Obligation
Purpose of Expenditure		Category/		M / D D / Y Y Y Y
MEDIA PLACEMENT		Type 004		09 20 2024
Name of Federal Candidate		Support	Office Sought	: X House District: 07
WILD, SUSAN, , ,		X Oppose	Preside	nt Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		571456.08	Disbursement 2024 Ot	For: Primary ⊠ General her (specify) ▶
Full Name of Payee			Date o	of Public Distribution/Dissemination
BIG DOG STRATEGIES, LLC				09 25 Y Y Y Y Y Y Y
Mailing Address 23150 FASHION DR			A	
STE 231			Amour	nt
City	State	Zip Code		44020.41
ESTERO	FL	33928		ction ID : SE24.588 of Disbursement or Obligation
Purpose of Expenditure DIRECT MAIL		Category/ Type 004		09 / 21 / 2024
Name of Federal Candidate		Support	Office Sought	:: X House District: 07
WILD, SUSAN, , ,		X Oppose	Preside	ΡΔ
Calendar Year-To-Date Per Election for Office Sought		571456.08	Disbursement 2024 Ot	For: Primary
(a) SUBTOTAL of Itemized Independent Expenditures			•	442904.80
(b) SUBTOTAL of Unitemized Independent Expenditure	es		•	
(c) TOTAL Independent Expenditures				
				4 4
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its ag	or authorized			
Crosby, Caleb, , ,		Date	M M / 09	27 2024
Signature		Bate	التاا	

ooneadic L)		FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund		C C00504530
Check if 24-hour report X 48-hour report New re	port Amends report file	d on Mam / Dab / Yayayay
Full Name of Payee		Date of Public Distribution/Dissemination
STARBOARD ADVERTISING		09 25 2024
Mailing Address 16192 COASTAL HIGHWAY		Amount
City State	Zip Code	95000.00
LEWES DE	19958	Transaction ID : SE24.576 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PLACEMENT	Category/ Type 004	09 / 23 / 2024
Name of Federal Candidate	Support Office	ce Sought: X House District: 07
WILD, SUSAN, , ,	Oppose	President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	571456.08 Disk 2024	oursement For: Primary X General Other (specify) ▶
Full Name of Payee SOMETHING ELSE STRATEGIES, LLC Mailing Address 212 GOLDEN WILLOW COURT		Date of Public Distribution/Dissemination 09 25 2024
		Amount
City State	Zip Code	13000.00
EASLEY SC	29642	Transaction ID : SE24.617 Date of Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION	Category/ Type 004	09 / 24 / 2024
Name of Federal Candidate	Support Office	ce Sought: X House District: 07
WILD, SUSAN, , ,		President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	571456.08 Disl 202	bursement For: Primary General Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures		108000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	······	
Under penalty of perjury I certify that the independent expenditure with, or at the request or suggestion of, any candidate or authorize party committee) any political party committee or its agent.		
Crosby, Caleb, , ,	Date	09 27 2024
Signature		

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NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Congressional Leadership Fund	C C00504530
Check if 24-hour report X 48-hour report New	v report Amends report filed on Amends report
Full Name of Payee	Date of Public Distribution/Dissemination
P2P MESSAGING	09 / 25 / 2024
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54	Amount
City State	Zip Code 1376.28
MCLEAN VA	22101 Transaction ID : SE24.642 Date of Disbursement or Obligation
Purpose of Expenditure TEXT MESSAGES	Category/ Type 004 09 / 25 / Y 2024
Name of Federal Candidate	Support Office Sought: House District: 07
WILD, SUSAN, , ,	Oppose President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2024 Other (applied)
	Other (specify)
Full Name of Payee STARBOARD ADVERTISING	Date of Public Distribution/Dissemination
Mailing Address 16192 COASTAL HIGHWAY	09 25 2024 Amount
City State	Zip Code 950.00
LEWES DE	19958 Transaction ID : SE24.638 Date of Disbursement or Obligation
Purpose of Expenditure DIGITAL PRODUCTION	Category/ Type 004 09 / 25 / Y 2024
Name of Federal Candidate	Support Office Sought: House District: 07
WILD, SUSAN, , ,	Oppose President Senate State: PA
Calendar Year-To-Date Per Election for Office Sought	571456.08 Disbursement For: ☐ Primary ☐ General Other (specify) ►
(a) SUBTOTAL of Itemized Independent Expenditures	2326.28
(b) SUBTOTAL of Unitemized Independent Expenditures	······
(c) TOTAL Independent Expenditures	>
	itures reported herein were not made in cooperation, consultation, or concert brized committee or agent of either, or (if the reporting entity is not a political
Crosby, Caleb, , ,	Date 09 27 2024
Signature	

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Schedule E)	PAGE 49 OF 53 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Congressional Leadership Fund	C C00504530			
Check if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee	Date of Public Distribution/Dissemination			
RED MAVERICK MEDIA LLC	09 25 2024			
Mailing Address 1426 N. 3RD STREET	Amount			
SUITE 310				
City State Zip Co				
HARRISBURG PA 17102	Transaction ID : SE24.629 Date of Disbursement or Obligation			
Purpose of Expenditure DIRECT MAIL Category	gory/ 004 09 24 2024			
I	Support Office Sought: House District:08			
BRESNAHAN, ROB, , ,	Oppose President Senate State: PA			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary			
Full Name of Payee	Date of Public Distribution/Dissemination			
FLEXPOINT MEDIA INC	09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO BOX 1051	Amount			
City State Zip Co NEW ALBANY OH 43054				
	Date of Disbursement or Obligation			
Purpose of Expenditure MEDIA PLACEMENT Categ	gory/ Type 004 09 / 20 / Y Y Y Y			
Name of Federal Candidate	Support Office Sought: House District: 08			
CARTWRIGHT, MATTHEW, , ,	☐ President ☐ Senate State: PA			
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary X General 2024 Other (specify) ▶			
(a) SUBTOTAL of Itemized Independent Expenditures	528576.14			
(b) SUBTOTAL of Unitemized Independent Expenditures				
(c) TOTAL 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, , ,	Date 09 27 2024			
Signature	Date 09 27 2024			

Congressional Leadership Fund Check if 24-hour report	N NUMBER ▼				
Check if 24-hour report					
Check if24-hour report					
STARBOARD ADVERTISING Mailing Address 16192 COASTAL HIGHWAY Amount	Check if 24-hour report X 48-hour report New report Amends report filed on				
STARBOARD ADVERTISING Mailing Address 16192 COASTAL HIGHWAY Amount	Dissemination				
Amount	2024				
City State 7in Code					
City State Zip Code	115000.00				
LEWES DE 19958 Transaction ID : SE24.571 Date of Disbursement or Ob	oligation				
Purpose of Expenditure Category/ Time 004 09 23	2024				
DIGITAL PLACEMENT Type 004 09 23	2024				
Name of Federal Candidate Support Office Sought: X House D	istrict: 08				
	State: PA				
Calendar Year-To-Date Per Election for Office Sought 1877243.52 Disbursement For: □ Primary 2024 Other (specify) ▶	X General				
Full Name of Payee Date of Public Distribution/D	Dissemination				
FLEXPOINT MEDIA INC 09 25	2024				
Mailing Address PO BOX 1051 Amount					
City State Zip Code	141322.39				
NEW ALBANY OH 43054 Transaction ID: SE24.522 Date of Disbursement or Ob	oligation				
Purpose of Expenditure MEDIA PLACEMENT Category/ Type 004 09 20	2024				
Name of Federal Candidate Support Office Sought: House D	District: 02				
COTTER SMASAL, MISSY, , , Oppose President Senate	State: VA				
Calendar Year-To-Date Per Election for Office Sought A29790.89 Disbursement For: □ Primary 2024 Other (specify) ▶	X General				
(a) SUBTOTAL of Itemized Independent Expenditures					
(a) cost of the masses masses make the masses make the masses masses make	200322.33				
(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 Date					

Schedule E)	EXI ENDI	TOTILO		PAGE 51 OF 53 FOR SE OF FORM 24/48
			C IDENTIFICATION NUMBER ▼	
Congressional Leadership Fund			C	C00504530
Check if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee			Date of F	Public Distribution/Dissemination
STARBOARD ADVERTISING			M 09	25 / 2024
Mailing Address 16192 COASTAL HIGHWAY			Amount	
City	tate	Zip Code	— I	90000.00
	DE	19958		ion ID : SE24.577 Disbursement or Obligation
Purpose of Expenditure		Category/ 004	M 09	23 2024
DIGITAL PLACEMENT		Type 004	09	23 2024
Name of Federal Candidate		Support	Office Sought:	X House District: 02
COTTER SMASAL, MISSY, , ,		X Oppose	President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		429790.89	Disbursement For 2024 Other	or:
Full Name of Payee			Date of F	Public Distribution/Dissemination
STRATEGIC PARTNERS & MEDIA, LLC			M 09	
Mailing Address 1851A MCGUCKIAN STREET				20 2024
			Amount	
City	tate	Zip Code		13000.00
	MD	21401		on ID : SE24.601 Disbursement or Obligation
Purpose of Expenditure MEDIA PRODUCTION		Category/ Type 004	M 09	
Name of Federal Candidate		Support	Office Sought:	House District: 02
COTTER SMASAL, MISSY, , ,		Oppose	President	Senate State: VA
Calendar Year-To-Date Per Election for Office Sought		429790.89	Disbursement For 2024 Othe	or: Primary X General r (specify) ▶
_ L				(-1))
(a) SUBTOTAL of Itemized Independent Expenditures			•	103000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	s			7 1 7 1 7
(c) TOTAL Independent Expenditures				
			-	4- 4- 4-
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, , ,		Date	00	27 2024
Signature				

oonedale Ly		FOR SE OF FORM 24/48		
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼		
Congressional Leadership Fund		C C00504530		
Check if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee		Date of Public Distribution/Dissemination		
FLEXPOINT MEDIA INC		09 25 / 2024		
Mailing Address PO BOX 1051		Amount		
City State	182193.75			
NEW ALBANY OH	·			
Purpose of Expenditure MEDIA PLACEMENT	Category/ Type 004	Date of Disbursement or Obligation M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate	Support Offi	ice Sought: X House District: 02		
COTTER SMASAL, MISSY, , ,	X Oppose	President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought	429790.89 Disl 202			
Full Name of Payee		Other (specify) Date of Public Distribution/Dissemination		
P2P MESSAGING		Date of Public Distribution/Dissemination 09 09 09 09 09 09 09 09		
Mailing Address 1390 CHAIN BRIDGE ROAD SUITE 54		Amount		
City State	Zip Code	2324.75		
MCLEAN VA	22101	Transaction ID : SE24.641 Date of Disbursement or Obligation		
Purpose of Expenditure TEXT MESSAGES	Category/ Type 004	09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Name of Federal Candidate	Support Offi	ice Sought: House District: 02		
COTTER SMASAL, MISSY, , ,		President Senate State: VA		
Calendar Year-To-Date Per Election for Office Sought	429790.89 Dis 202	sbursement For: Primary		
(a) SUBTOTAL of Itemized Independent Expenditures	····	184518.50		
(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, , ,	Date	09 27 2024		
Signature				

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OF

Schedule E)	PAGE 53 OF 53 FOR SE OF FORM 24/48			
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼			
Congressional Leadership Fund	C C00504530			
Check if 24-hour report X 48-hour report New report Amends report filed on				
Full Name of Payee	Date of Public Distribution/Dissemination			
STARBOARD ADVERTISING	09 / 25 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address 16192 COASTAL HIGHWAY	Amount			
City State Zip Code	950.00			
LEWES DE 19958	Transaction ID : SE24.637 Date of Disbursement or Obligation			
Purpose of Expenditure Category/	004 09 25 2024			
DIGITAL PRODUCTION Type	09 25 2024			
Name of Federal Candidate Suppor	t Office Sought: X House District: 02			
COTTER SMASAL, MISSY, , ,				
Calendar Year-To-Date Per Election for Office Sought 429790.89	Disbursement For: Primary General 2024 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 Y			
Name of Federal Candidate Suppor	rt Office Sought: House District:			
Oppose				
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General			
Tot Election for Since Sought	Other (specify)			
(a) SUBTOTAL of Itemized Independent Expenditures	950.00			
(b) SUBTOTAL of Unitemized Independent Expenditures				
	7 7			
(c) TOTAL Independent Expenditures	13805084.05			
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.				
	Date 09 27 2024			
Signature				