

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

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

|                                                                              |                             |                                                                                                                                                                     |
|------------------------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>FlexPoint Media</b>                                 |                             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>09 / 28 / 2022</b>                                                                                |
| Mailing Address <b>PO Box 1051</b>                                           |                             | Amount<br><b>184932.39</b>                                                                                                                                          |
| City<br><b>New Albany</b>                                                    | State<br><b>OH</b>          | Zip Code<br><b>43054</b>                                                                                                                                            |
| Purpose of Expenditure<br><b>Media Placement</b>                             | Category/Type<br><b>004</b> | Transaction ID : <b>001</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>09 / 23 / 2022</b>                                                        |
| Name of Federal Candidate<br><b>Porter, Katherine, , ,</b>                   |                             | Office Sought: <input checked="" type="checkbox"/> House District: <b>47</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>1020849.99</b> |                             | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2022 <input type="checkbox"/> Other (specify) ▶                   |

|                                                                              |                             |                                                                                                                                                                     |
|------------------------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Full Name of Payee<br><b>Cavalry LLC</b>                                     |                             | Date of Public Distribution/Dissemination<br>MM / DD / YYYY<br><b>09 / 28 / 2022</b>                                                                                |
| Mailing Address <b>1634 Eye Street NW</b><br><b>#800</b>                     |                             | Amount<br><b>75000.00</b>                                                                                                                                           |
| City<br><b>Washington</b>                                                    | State<br><b>DC</b>          | Zip Code<br><b>20006</b>                                                                                                                                            |
| Purpose of Expenditure<br><b>Digital Placement</b>                           | Category/Type<br><b>004</b> | Transaction ID : <b>002</b><br>Date of Disbursement or Obligation<br>MM / DD / YYYY<br><b>09 / 26 / 2022</b>                                                        |
| Name of Federal Candidate<br><b>Porter, Katherine, , ,</b>                   |                             | Office Sought: <input checked="" type="checkbox"/> House District: <b>47</b><br><input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b> |
| Calendar Year-To-Date<br>Per Election for Office Sought<br><b>1095849.99</b> |                             | Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br>2022 <input type="checkbox"/> Other (specify) ▶                   |

|                                                                    |                  |
|--------------------------------------------------------------------|------------------|
| (a) <b>SUBTOTAL</b> of Itemized Independent Expenditures..... ▶    | <b>259932.39</b> |
| (b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures ..... ▶ |                  |
| (c) <b>TOTAL</b> Independent Expenditures..... ▶                   | <b>259932.39</b> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Crosby, Caleb, , ,

[Electronically Filed]

Date

MM / DD / YYYY  
**09 / 30 / 2022**

Signature