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

Schedule E)	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				
Full Name of Payee	Date of Public Distribution/Dissemination			
FlexPoint Media Inc	M M / D D / Y Y Y Y			
Mailing Address PO Box 1051	10 31 2022 Amount			
City State Zip Code	50000.00			
New Albany OH 43054	Transaction ID : 001 Date of Disbursement or Obligation			
Purpose of Expenditure Digital Placement Category/ Type 004	10			
Name of Federal Candidate Support Offic	e Sought: X House District: 02			
O'Halleran, Tom, , ,	President Senate State: AZ			
Calendar Year-To-Date Per Election for Office Sought Disb 2022	ursement For: Primary			
Full Name of Payee	Date of Public Distribution/Dissemination			
FlexPoint Media Inc	10 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
Mailing Address PO Box 1051	10 01 2022			
	Amount			
City State Zip Code	50000.00			
New Albany OH 43054	Transaction ID : 002 Date of Disbursement or Obligation			
Purpose of Expenditure Digital Placement Category/ Type 004	M M / D D / Y Y Y Y			
Type 004	10 30 2022			
Name of Federal Candidate Support Office	ce Sought: 🗶 House District:02			
Crane, Eli, , ,	President Senate State: AZ			
Calendar Year-To-Date Per Election for Office Sought Disb 2023				
	U Other (specify) ►			
(a) SUBTOTAL of Itemized Independent Expenditures	100000.00			
(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.				
Buto	11 01 2022			
Signature				

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	DENT EXPEND	HOHLO	PAGE 2 OF 3 FOR SE OF FORM 24/48	
NAME OF COMMITTEE (In Full)			FEC IDENTIFICATION NUMBER ▼	
Congressional Leadership Fund			C C00504530	
Check if X 24-hour report 48-hour report New report Amends report filed on				
Full Name of Payee FlexPoint Media Inc			Date of Public Distribution/Dissemination	
Mailing Address PO Box 1051			10 31 2022 Amount	
City New Albany	State OH	Zip Code 43054	375.00 Transaction ID : 003	
Purpose of Expenditure Digital Production		Category/ Type 004	Date of Disbursement or Obligation 10 31 2022	
Name of Federal Candidate O'Halleran, Tom, , ,		Support	Office Sought: House District: 02	
Calendar Year-To-Date Per Election for Office Sought		721550.00	President Senate State: AZ □ Disbursement For: Primary General 2022	
Full Name of Payee FlexPoint Media Inc	7	1.00	Date of Public Distribution/Dissemination	
Mailing Address PO Box 1051			10 / 31 / 2022 Amount	
City	State	Zip Code 43054	375.00 Transaction ID : 004	
New Albany Purpose of Expenditure Digital Production	OH	Category/ Type 004	Date of Disbursement or Obligation	
Name of Federal Candidate Crane, Eli, , ,		✗ Support	Office Sought: M House District: 02	
Calendar Year-To-Date Per Election for Office Sought		Oppose 121925.00	President Senate State: AZ Disbursement For: Primary General 2022	
Per Liection for Office Sought	7	121020.00	Other (specify) -	
(a) SUBTOTAL of Itemized Independent Exper	nditures		750.00	
(b) SUBTOTAL of Unitemized Independent Ex	penditures		•	
(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	[Electron	nically Filed] Date	11 01 2022	

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

	Fileduic E	FOR SE OF FORM 24/48		
	ME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼		
C	Congressional Leadership Fund	C C00504530		
Ch	eck if X 24-hour report 48-hour report New report Amends report filed	I on Man / Dad / Yayayay		
	Full Name of Payee _	Date of Public Distribution/Dissemination		
	Prime Media Partners	10 31 2022		
	Mailing Address 4201 Wilson Blvd	Amount		
	#110-126			
	City State Zip Code Arlington VA 22203	6500.00 Transaction ID: 005 Date of Disbursement or Obligation		
	Purpose of Expenditure Media Production Category/ Type 004	10 31 / Y 2022		
	Name of Federal Candidate Support Office	e Sought: X House District: 02		
	O'Halleran, Tom, , ,	President Senate State: AZ		
	Calendar Year-To-Date Disbrace			
	. C. Elssion is simos coagni	U Other (specify) ▶		
	Full Name of Payee Prime Media Partners	Date of Public Distribution/Dissemination		
	Mailing Address 4201 Wilson Blvd	10 31 2022		
	#110-126	Amount		
	City State Zip Code	6500.00		
	Arlington VA 22203	Transaction ID: 006 Date of Disbursement or Obligation		
	Purpose of Expenditure Media Production Category/ Type 004	10 31 2022		
	Name of Federal Candidate Support Offic	e Sought:		
	Crane, Eli, , ,	President Senate State: AZ		
	Calendar Year-To-Date Per Election for Office Sought Disb 2022	ursement For: Primary		
	(a) SUBTOTAL of Itemized Independent Expenditures	13000.00		
(b) SUBTOTAL of Unitemized Independent Expenditures				
	(c) TOTAL Independent Expenditures	113750.00		
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.				
	[El-+	M / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
	Signature [Electronically Filea] Date	2022		

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