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

Schedule E)	PAGE 1 OF 1 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 FlexPoint Media Inc	Date of Public Distribution/Dissemination
	09 / 14 / 2022
Mailing Address PO Box 1051	Amount
City State Zip Code	90408.06
New Albany OH 43054	Transaction ID: 001 Date of Disbursement or Obligation
Purpose of Expenditure Media Placement Category/ Type 004	09 09 / 2022
Name of Federal Candidate Support	Office Sought: House District:03
Pfaff, Brad, , ,	President Senate State: WI
Calendar Year-To-Date Per Election for Office Sought 220266.12	Disbursement For: Primary ☐ General Other (specify) ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐
Full Name of Payee	Date of Public Distribution/Dissemination
	M = M / D = D / Y = Y = Y
Mailing Address	Amount
	7.11154.11
City State Zip Code	
Diverse of Event dilibera	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate Support	Office Sought: House District:
Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disbursement For:
(a) SUBTOTAL of Itemized Independent Expenditures	90408.06
(b) SUBTOTAL of Unitemized Independent Expenditures	•
(c) TOTAL Independent Expenditures	90408.06
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 Signature	09 16 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
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