24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full) FEC IDENTIFICATION NUMBER ▼	
Congressional Leadership Fund	C C00504530
	U iiiiissi
Check if 24-hour report 48-hour report New report Ame	nds report filed on M M M / D D / Y Y Y Y Y
Full Name of Payee RumbleUp	Date of Public Distribution/Dissemination
'	10 09 / Y Y Y Y Y
Mailing Address 2021 L St. NW	Amount
Suite 101-220	Amount
City State Zip Code	6080.98
Washington DC 20036	Transaction ID : SE.001 Date of Disbursement or Obligation
Purpose of Expenditure Text messages Category/ Type	004 09 / D D / Y Y Y Y Y 2020
Name of Federal Candidate	pport Office Sought: House District: 08
Timmons-Goodson, Pat, , ,	ppose President Senate State: NC
Calendar Year-To-Date Per Election for Office Sought 548785.77	Disbursement For: Primary
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/	M = M / D = D / Y = Y = Y
Type	
Name of Federal Candidate	upport Office Sought: House District:
	ppose President Senate State:
Calendar Year-To-Date	Disbursement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	6080.98
(b) SUBTOTAL of Unitemized Independent Expenditures	······································
(c) TOTAL Independent Expenditures	6080.98
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] Signature	Date 10 11 2020
Oignature	