10/14/2022 22 : 26

Image# 202210149532550523 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)		ITONES		PAGE 1 OF 2 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)			FEC	IDENTIFICATION NUMBER ▼
Congressional Leadership Fu	nd		С	C00504530
Check if 24-hour report 🗶 48-hour	report X New rep	oort Amends repo	ort filed on	
Full Name of Payee			Date of Put	blic Distribution/Dissemination
FlexPoint Media			10 M	/ D D / Y Y Y Y 12 2022
Mailing Address PO Box 1051			Amount	
City	State	Zip Code		376545.56
New Albany	ОН	43054	Transaction	yy
Purpose of Expenditure Media Placement		Category/ Type 004	M M	
Name of Federal Candidate		Support	Office Sought:	¥ House District: 22
Conole, Francis, , ,		X Oppose	President	Senate State: NY
Calendar Year-To-Date Per Election for Office Sought	· · · · · · ·	2185502.92	Disbursement For: 2022 Other (Primary General
Full Name of Payee			Date of Pul	olic Distribution/Dissemination
FlexPoint Media			M	
Mailing Address PO Box 1051			10	12 2022
			Amount	
City	State	Zip Code		92957.50
New Albany	ОН	43054	Transaction Date of Dis	ID:002 bursement or Obligation
Purpose of Expenditure Media Placement		Category/ Type 004	M 10	/ D D / Y Y Y Y 11 / 2022
Name of Federal Candidate		Support	Office Sought:	House District: 22
Conole, Francis, , ,		× Oppose	President	Senate State: <u>NY</u>
Calendar Year-To-Date		2278460.42	Disbursement For: 2022	Primary X General
Per Election for Office Sought		2210100.12		specify) ►
(a) SUBTOTAL of Itemized Independent	Expenditures		·· ▶	469503.06
(b) SUBTOTAL of Unitemized Independe	ent Expenditures		•••	7
(c) TOTAL Independent Expenditures				
Under penalty of perjury I certify that the with, or at the request or suggestion of, party committee) any political party comm	any candidate or authorized			
Crosby, Caleb, , ,			M M / D	
Signature	[Electron	<i>nically Filed]</i> Date	e 10 14	2022

Image# 202210149532550524 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

(Schedule E)	PAGE 2 OF 2 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 or	
Full Name of Payee CRed Eagle Media	Date of Public Distribution/Dissemination
Mailing Address 815 Slaters Lane	10 12 2022 Amount
City State Zip Code	50000.00
	Transaction ID: 003 Date of Disbursement or Obligation
Purpose of Expenditure Category/ Digital Placement 004	M M / D D / Y Y Y Y 10 12 2022
Name of Federal Candidate Support Office S	Sought: X House District: 22
Conole Francis	President Senate State: NY
Calendar Year-To-Date Disburse 2328460.42	ement For: Primary X General Other (specify) ►
Full Name of Payee	Date of Public Distribution/Dissemination
	M M / D D / Y Y Y Y
Mailing Address	
	Amount
City State Zip Code	
	Date of Disbursement or Obligation
Purpose of Expenditure Category/ Type	
Name of Federal Candidate Office S	Sought: House District:
	President Senate State:
Calendar Year-To-Date Disburs	ement For: Primary General
Per Election for Office Sought	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	50000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	519503.06
Under penalty of perjury I certify that the independent expenditures reported herein were not made with, or at the request or suggestion of, any candidate or authorized committee or agent of either, of party committee) any political party committee or its agent.	
Crosby, Caleb, , , [Electronically Filed] Date 10	14 2022
Signature	